

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morlham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 337724 (9)

1. Corporation Name

PEERLESS INSTRUMENT CO., INC.



Principal Place of Business

500 S.E. 32ND COURT  
FT. LAUDERDALE FL 33316

Mailing Address

500 S.E. 32ND COURT  
FT. LAUDERDALE FL 33316

3. Date Incorporated or Qualified  
11/15/1968

3a. Date of Last Report  
02/09/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number  
11-2206206

Applied For  
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BRADY, ROBERT T  
271 NW 42ND AVE  
COCONUT CREEK FL 33066

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and the day it is made

By: (If Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE  
NAME MEYER, CHARLES  
STREET ADDRESS 120 HIGHWOOD CIR  
CITY-ST-ZIP OYSTER BAY COVE NY

TITLE SD ☒ DELETE  
NAME MEYER, RUTH  
STREET ADDRESS 120 HIGHWOOD CIR  
CITY-ST-ZIP OYSTER BAY COVE NY

TITLE PD ☐ DELETE  
NAME BRADY, ROBERT T  
STREET ADDRESS 271 NW 42ND AVE  
CITY-ST-ZIP COCONUT CREEK FL

TITLE VP ☐ DELETE  
NAME OGRODOWSKI, RICHARD  
STREET ADDRESS 4480 NW 2ND COURT  
CITY-ST-ZIP COCONUT CREEK FL

TITLE VP ☐ DELETE  
NAME LIPPIELLO, DANIEL  
STREET ADDRESS 4111 CORAL TREE CIRCLE #324  
CITY-ST-ZIP COCONUT CREEK FL

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

*Robert Brady*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT BRADY

April 19, 1996

phone 954-761-1202

CR2E034 (12/95)