


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2007 8:00 am
Secretary of State

05-04-2007 90093 019 ***150.00

DOCUMENT # F06000003298					
1. Entity Name CRI NEW JERSEY, INC.					
Principal Place of Business C/O RICHARD WEINER 22 AUDREY PL FAIRFIELD, NJ 07004			Mailing Address C/O RICHARD WEINER 22 AUDREY PL FAIRFIELD, NJ 07004		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address do Ken Siletski			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 22-3530559	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PCEO FRIEDMAN, JASON 22 AUDREY PL FAIRFIELD, NJ 07004	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V GROELINGER, ANDREW 22 AUDREY PL FAIRFIELD, NJ 07004	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO WEINER, RICHARD 22 AUDREY PL FAIRFIELD, NJ 07004	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KLEISSLER, PAUL 22 AUDREY PL FAIRFIELD, NJ 07004	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ cfo					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date</small> 5/1/07					
<small>Daytime Phone #</small> 973-244-9911					

40105300



05012007 Chg-P CR2E034 (12/06)

4. FEI Number
22-3530559

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

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FILE NOW!!! FEE IS \$150.00
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9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PCEO
FRIEDMAN, JASON
22 AUDREY PL
FAIRFIELD, NJ 07004

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

V
GROELINGER, ANDREW
22 AUDREY PL
FAIRFIELD, NJ 07004

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

CFO
WEINER, RICHARD
22 AUDREY PL
FAIRFIELD, NJ 07004

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
KLEISSLER, PAUL
22 AUDREY PL
FAIRFIELD, NJ 07004

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☒ Change ☐ Addition

KENNETH L. SILETSKI

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #