

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Feb 15 1996 8:00 am
Secretary of State

DOCUMENT # 151787 (9)

1. Corporation Name

PAR INC

Principal Place of Business

170 SOUTH HALIFAX AVENUE
DAYTONA BEACH FL 32118-1480

Mailing Address

170 SOUTH HALIFAX AVENUE
DAYTONA BEACH FL 32118-1480



2. Principal Place of Business

21 State Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

MC CULLOUGH, EUGENE H.
170 SOUTH HALIFAX AVENUE
DAYTONA BEACH FL 32118

81 Name

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

83

84 City

FL

85 Zip Code

3. Date Incorporated or Qualified

01/01/1947

3a. Date of Last Report

02/14/1995

4. FET Number

59-1114823

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

10. Name and Address of New Registered Agent

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 of the individual who is the registered agent of the corporation

DATE: Registered Agent signature required when replacing

DATE

12. OFFICERS AND DIRECTORS

1. TITLE ☐ DELETE

NAME
P UNATIN, NELSON A.J.
STREET ADDRESS
C/O AUDITAX 170 S HALIFAX AVE
CITY, ST, ZIP
DAYTONA BEACH FL

2. TITLE ☐ DELETE

NAME
V ZANDI, AVA N.
STREET ADDRESS
1004 WARDEN CT
CITY, ST, ZIP
NEWTOWN SQ PA

3. TITLE ☐ DELETE

NAME
ST BLICKMAN, MRS. LINDA NEL
STREET ADDRESS
430 E. 86TH ST., #2D
CITY, ST, ZIP
NEW YORK CITY NY

4. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

5. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY, ST, ZIP

2. TITLE ☐ Change ☐ Addition

21 NAME

22 STREET ADDRESS

23 CITY, ST, ZIP

3. TITLE ☐ Change ☐ Addition

31 NAME

32 STREET ADDRESS

33 CITY, ST, ZIP

4. TITLE ☐ Change ☐ Addition

41 NAME

42 STREET ADDRESS

43 CITY, ST, ZIP

5. TITLE ☐ Change ☐ Addition

51 NAME

52 STREET ADDRESS

53 CITY, ST, ZIP

6. TITLE ☐ Change ☐ Addition

61 NAME

62 STREET ADDRESS

63 CITY, ST, ZIP

14. I 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:

Ann J Unatin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/12/96

Daytime Phone #

CR2E034 (12/95)