FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 AM 9:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 835938 (2)

1. Corporation Name
CENTRICO INC.

Principal Place of Business: 100 FAIRWAY COURT, NORTHVALE, N. J. 07647

Mailing Address: 100 FAIRWAY COURT, NORTHVALE, N. J. 07647

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/15/1976
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

4. FEI Number: 22-1535190 ☐ 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 [X] Yes ☐ No

9. Name and Address of Current Registered Agent

SEWELL, WILBUR R.
360 SIXTH ST., S.W.
WINTER HAVEN FL 33880

10. Name and Address of New Registered Agent

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 title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	11 TITLE	C [X] Change ☐ Addition
NAME	MUELLER-HABIG, MICHAEL	12 NAME	MUELLER-HABIG, MICHAEL
STREET ADDRESS	RUA SANCA MONICA 201	13 STREET ADDRESS	250 THE BY WAY
CITY · ST · ZIP	CAMPINAS BR	14 CITY · ST · ZIP	RIDGEWOOD, NEW JERSEY 07450
TITLE	VTD	21 TITLE	T [X] Change ☐ Addition
NAME	SPIEKERMANN, JOSEF	22 NAME	
STREET ADDRESS	15 ANDERSON COURT	23 STREET ADDRESS	
CITY · ST · ZIP	WOODCLIFF LAKE NJ	24 CITY · ST · ZIP	
TITLE	PSD	31 TITLE	☐ Change ☐ Addition
NAME	WENDENBURG, WEND	32 NAME	
STREET ADDRESS	GLEN GOIN	33 STREET ADDRESS	
CITY · ST · ZIP	ALPINE NJ	34 CITY · ST · ZIP	
TITLE	D	41 TITLE	S [X] Change ☐ Addition
NAME	ORBE, OCTAVIUS A.	42 NAME	OCTAVIUS A. ORBE, ESQ.
STREET ADDRESS	241 MOUNTAIN AVE.	43 STREET ADDRESS	743 WEST SADDLE RIVER ROAD
CITY · ST · ZIP	RIDGEWOOD NJ	44 CITY · ST · ZIP	HOHOKUS, NEW JERSEY 07423
TITLE	D	51 TITLE	D [X] Change ☐ Addition
NAME	PEITZMANN, AUGUST	52 NAME	OLE ANDERSEN
STREET ADDRESS	201 TODO EL MUNDO	53 STREET ADDRESS	AM BERGE 20
CITY · ST · ZIP	WOODSIDE CA	54 CITY · ST · ZIP	D-58456 WITTEN
TITLE	V	61 TITLE	D [X] Change ☐ Addition
NAME	STAHL, PETER	62 NAME	DR. HEINZ HAMFORT
STREET ADDRESS	COTTONTAIL TRAIL	63 STREET ADDRESS	INDERGEIST 69a
CITY · ST · ZIP	UPPER SADDLE RVR NJ	64 CITY · ST · ZIP	D-59302 OLDE

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)(i), 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: [signature] 201 767-3900 x2237
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Wend Wendenburg 4/26/95

0386219 FP