

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 840197 (8)

1. Corporation Name

PIRELLI CABLE CORPORATION

Principal Place of Business

705 INDUSTRIAL DR
LEXINGTON SC 29072
US

Mailing Address

705 INDUSTRIAL DR
LEXINGTON SC 29072
US



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/13/1978

3a. Date of Last Report

04/04/1995

4. FEI Number

13-2843525

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

UNITED STATES CORPORATION COMPANY
1201 HAYES ST, STE 105
TALLAHASSEE FL 32301

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 new, if applicable

(NOTE - Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PCEO
EUGENIO RAZELLI
STREET ADDRESS
111 LAME HORSE ROAD
CITY-ST-ZIP
COLUMBIA SC

TITLE ☐ DELETE

NAME
VPD
ANTHONY ATKINSON
STREET ADDRESS
2 HOLLY HOCK COURT
CITY-ST-ZIP
IRMO C

TITLE ☐ DELETE

NAME
DC
KAUFMAN, ROBERT M
STREET ADDRESS
345 EAST 52ND STREET
CITY-ST-ZIP
NEW YORK NY

TITLE ☐ DELETE

NAME
VP
ALEX ROSENZWEIG
STREET ADDRESS
3390 WAYNE AVENUE
CITY-ST-ZIP
BRONX NY

TITLE ☐ DELETE

NAME
V
ROBERT E. DALTON
STREET ADDRESS
1-237 PACE BROOK
CITY-ST-ZIP
COLUMBIZ SC

TITLE ☐ DELETE

NAME
D
MARCELLO DE GIORGIS
STREET ADDRESS
RFD 1, BOX 79
CITY-ST-ZIP
LAKEVILLE CT

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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

IRMO SC

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

ALEX ROSENZWEIG

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

VP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

COLUMBIA SC

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ANTHONY ATKINSON

3/5/96 (803) 951-4800

CR2E034 (12/95)