

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **849540** (0)

1. Corporation Name
C.J.M. PLANNING CORP.

Principal Place of Business
**26-01 PELLACK DR.
FAIR LAWN N.J. 07410**

Mailing Address
**26-01 PELLACK DR.
FAIR LAWN N.J. 07410**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/26/1981	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 22-1922447	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent WALLACE, CAROL 3378 PEBBLE BEACH DRIVE LAKE WORTH FL 33463		10. Name and Address of New Registered Agent	
81	Name	S. Charles Musumeci Sr.	
82	Street Address (P.O. Box Number is Not Acceptable)	121 PADDOCK LN.	
83			
84	City	WEST PALM BEACH	85 Zip Code FL 33463

11. Pursuant to the provisions of Sections 607.0500 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or register its 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 *S. Charles Musumeci Sr.* DATE **3/6/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUSUMECI, S. CHARLES	1.2 NAME	
STREET ADDRESS	455 KOSSUTH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	PARAMUS NJ	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUSUMECI, MARY A	2.2 NAME	
STREET ADDRESS	455 KOSSUTH ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	PARAMUS NJ	2.4 CITY-ST-ZIP	
TITLE	PTD	3.1 TITLE	CD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUSUMECI, JOSEPH C.	3.2 NAME	
STREET ADDRESS	38 HICKORY LN.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WALDWICK, NJ.	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MUSUMECI, JR S CHARLES	4.2 NAME	
STREET ADDRESS	11-13 COPLEY ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	NORTH HALEDON NJ	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	CHARLENE M STACY
STREET ADDRESS		5.3 STREET ADDRESS	W148 WINDSOR RD.
CITY-ST-ZIP		5.4 CITY-ST-ZIP	PARAMUS, NJ 07652
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing 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 *S. Charles Musumeci Sr.* DATE **3/6/98** 201-797-6668

CR2E034 (10/97)