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May 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 851441 (6)

1. Corporation Name
AJAX ELECTRIC MOTOR CORP.

Principal Place of Business
2100 BRIGHTON-HENRIETTA TOWNLINE ROAD
ROCHESTER NY 14623

Mailing Address
P.O. BOX 262
ROCHESTER NY 14601-0262



3. Date Incorporated or Qualified 12/31/1981
3a. Date of Last Report 11/18/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 Suite Apt # etc	26 Suite, Apt. #, etc.	16-0759773	Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23 Zip	28 Country	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24	25	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CEOD	11 TITLE	
NAME	NORRY, NEIL	12 NAME	
STREET ADDRESS	2100 BRIGHTON-HENRIETTA TOWNLINE ROAD	13 STREET ADDRESS	
CITY-ST-ZIP	ROCHESTER NY 14623	14 CITY-ST-ZIP	
TITLE	COPD	2.1 TITLE	
NAME	MISTRETTA, PHILIP	2.2 NAME	
STREET ADDRESS	2100 BRIGHTON-HENRIETTA TOWNLINE ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	ROCHESTER NY 14623	2.4 CITY-ST-ZIP	
TITLE	VPFT	3.1 TITLE	
NAME	DONOFRIO, RICHARD	3.2 NAME	
STREET ADDRESS	2100 BRIGHTON-HENRIETTA TOWNLINE ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	ROCHESTER NY 14623	3.4 CITY-ST-ZIP	
TITLE	AT	4.1 TITLE	
NAME	KESEL, THERESA	4.2 NAME	
STREET ADDRESS	2100 BRIGHTON-HENRIETTA TOWNLINE ROAD	4.3 STREET ADDRESS	
CITY-ST-ZIP	ROCHESTER NY 14623	4.4 CITY-ST-ZIP	
TITLE	VPAS	5.1 TITLE	
NAME	ROSEN, FRED	5.2 NAME	
STREET ADDRESS	2100 BRIGHTON-HENRIETTA TOWNLINE ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	ROCHESTER NY 14623	5.4 CITY-ST-ZIP	
TITLE	VPSM	6.1 TITLE	
NAME	SIMMONDS, RICHARD	6.2 NAME	
STREET ADDRESS	2100 BRIGHTON-HENRIETTA TOWNLINE ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	ROCHESTER NY 14623	6.4 CITY-ST-ZIP	

14. I do 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97

716-240-1000

CR2E034 (9/96)