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

PROFIT CORPORATION ANNUAL REPORT



DOCUMENT # F9300001773

FLORIDA DEPARTMENT OF STATE **Katherine Harris**

Secretary of State

1999

1. Corporation Name

DIVISION OF CORPORATIONS

Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90103 025 ***150.00

CHOATE DEVELOPMENT CORP.						
Principal Place of Business Mailing Address		988				
15 GORDONS CORNER ROAD. SUITE 1-A IANALAPAN NJ 07726	215 GORDONS CORNER ROAD. SUITE 1-A MANALAPAN NJ 07726		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 04/12/1993		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
ī	26			22-2375692	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt	. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & Sta	ate -		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country	Zip	Country 30		This corporation owes the current year I Personal Property Tax.	ntangible ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
DRESCHER, HOWARD L 9480 SOUTH MILITARY TRAIL 4A BOYNTON BEACH FL 33436			Name Street Addr	ress (P.O. Box Number is Not Acceptable)	· ,	

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.

83 84 City

agent. i a	m ramiliar with, and accept the obligations of, S	ection 607.0305, Fion	ua Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title if a	policable. (NOTE:	Registered Agent signature re-	uired when reinstating)	DATE	
12.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	Р	☐ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	GOLDBERG, HOWARD P		1.2 NAME			
STREET ADDRESS	101 DOUBLE CREEK PARKWAY		1.3 STREET ADDRESS			
CITY-ST-ZIP	FREEHOLD NJ 07728		1.4 CITY-ST-ZIP			
TITLE	VPS	☐ DELETE	2.1 TITLE		Change	Addition
NAME	DRESCHER, HOWARD L		2.2 NAME			
STREET ADDRESS	2 CITIATION COURT		2.3 STREET ADDRESS	43 Kingfisher Court		
CITY-ST-ZIP	MARLBORO NJ 07746		2. 4 CITY-ST-ZIP	Marlboro, NJ 07746		
TITLE		☐ DELETE	31 TITLE		☐ Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY- ST-ZIP		<u></u>	
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4 3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		*****	
TITLE		□ DELETE	5.1 TITLE		Change	Addition Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>		5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADORESS			
CITY-ST-ZIP	L'E II A A L'E E L'E L'EL AL'E E L'EL		6.4 CITY-ST-ZIP	in Contine 110 07/2\(\text{i}\) Elorido Statutos I f		6

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 informationated 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, with all other like empowered.

SIGNATURE:

ce President/Director

01/05/1999

(732) 792-7899

Zip Code