FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # F94000002357 (1)

1. Corporation Name
LEVITON MANUFACTURING CO., INC.

Principal Place of Business	Mailing Address
59-25 LITTLE NECK PARKWAY LITTLE NECK NY 11362	59-25 LITTLE NECK PARKWAY LITTLE NECK NY 11362

3. Date Incorporated or Qualified: 05/06/1994
3a. Date of Last Report: 06/28/1995
4. FEI Number: 11-1001790 — 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 ☒ Yes ☐ No

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

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

9. **Name and Address of Current Registered Agent**

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

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, Registered Agent ______ DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	LEVITON, HAROLD	
STREET ADDRESS	59-25 LITTLE NECK PARKWAY	
CITY-ST-ZIP	LITTLE NECK NY 11362	
TITLE	VD	☐ DELETE
NAME	DEBIASI, RALPH	
STREET ADDRESS	59-25 LITTLE NECK PARKWAY	
CITY-ST-ZIP	LITTLE NECK NY 11362	
TITLE	S	☐ DELETE
NAME	SOKOLOW, STEPHEN	
STREET ADDRESS	59-25 LITTLE NECK PARKWAY	
CITY-ST-ZIP	LITTLE NECK NY 11362	
TITLE	D	☐ DELETE
NAME	AMSTERDAM, JACK	
STREET ADDRESS	59-25 LITTLE NECK PARKWAY	
CITY-ST-ZIP	LITTLE NECK NY 11362	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 — Date 4/30/96 — Daytime Phone #

CR2E034 (12/95)