

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 # F94000002915 (6)

1. Corporation Name

EMERSON RADIO CORP.

Principal Place of Business

9 ENTIN ROAD
PARSIPPANY NJ 07054
US

Mailing Address

9 ENTIN RD
PARSIPPANY NJ 07054
US



3. Date Incorporated or Qualified
06/03/1994

3a. Date of Last Report
01/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

4. FEI Number

22-3285224

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☐ DELETE
NAME JURICK, GEOFFREY P
STREET ADDRESS 9 ENTIN RD
CITY-ST-ZIP PARSEPPANY NJ

TITLE P ☐ DELETE
NAME DAVIS, EUGENE I
STREET ADDRESS 9 ENTIN RD
CITY-ST-ZIP PARSEPPANY NJ

TITLE S ☒ DELETE
NAME MCGRATH, ALBERT G JR
STREET ADDRESS 9 ENTIN RD.
CITY-ST-ZIP PARSEPPANY NJ 07054

TITLE C ☐ DELETE
NAME RISTY, EDDIE
STREET ADDRESS 9 ENTIN RD.
CITY-ST-ZIP PARSEPPANY NJ 07054

TITLE D ☐ DELETE
NAME FARNUM, JEROME H
STREET ADDRESS 9 ENTIN RD.
CITY-ST-ZIP PARSEPPANY NJ 07054

TITLE D ☐ DELETE
NAME BROWN, ROBERT H JR
STREET ADDRESS 9 ENTIN RD.
CITY-ST-ZIP PARSEPPANY NJ 07054

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

S
ELIZABETH J. Calanone
9 ENTIN Road
Parsippamy, NJ 07054

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

VP/Controller

3/5/96

(201)428-2027

Daytime Phone #

CR2E034 (12/95)