

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 # F94000004660 (6)

1. Corporation Name

GENPAC CORPORATION SOUTH



Principal Place of Business

8290 NATIONAL HWY.
PENNSAUKEN NJ 08110

Mailing Address

8290 NATIONAL HWY.
PENNSAUKEN NJ 08110

2. Principal Place of Business

21 PO Box 566

Suite, Apt. #, etc.

22

City & State

23 Thorofare NJ

Zip

24 08084

Country

25

2a. Mailing Address

26 PO Box 566

Suite, Apt. #, etc.

27

City & State

28 Thorofare NJ

Zip

29 08084

Country

30

9. Name and Address of Current Registered Agent

BLOOM, ERWIN A
1505 POINSETTA DR. BAY 5
DELRAY BEACH FL 33444

3. Date Incorporated or Qualified

09/09/1994

3a. Date of Last Report

03/21/1995

4. FET Number

22-1987972

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

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, typed or printed name of registered agent and title, if applicable

(If New Registered Agent signature required, check here)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME BLOOM, ERWIN A
STREET ADDRESS 6284 LA COSTA DR. APT. H
CITY-ST-ZIP BOCA RATON FL 33433

TITLE V ☐ DELETE

NAME BLOOM, ERIC A.
STREET ADDRESS 118 CYPRESS COURT
CITY-ST-ZIP CHERRY HILL NJ

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

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

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

922 Lakeside Blvd
Boca Raton, FL 33434

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 registered 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

3/22/96

609-251-9800

Date

Daytime Phone #

CR2E034 (12/95)