

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

55 MAY 19 AM 10:15

DOCUMENT # F94000004932 (9)

OPEX CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address

101 COLUMBIA RD
MORRISTOWN NJ 07962

Mailing Address

101 COLUMBIA RD
MORRISTOWN NJ 07962

(DO NOT WRITE IN THIS SPACE)

2. Date of Report		2a. Mailing Address		3. Date of Incorporation or Qualification		3a. Date of Last Report	
21		26		09/22/1994		3a.	
22		27		4. FIC Number		Applied For	
23		28		22-3056755		Not Applicable	
24		29		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
26		31		7. This corporation has liability for intangible tax under S. 199.032 Florida Statutes		☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

CT 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
85. Zip Code

11. Pursuant to the provisions of Sections 607.09(1) 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 607.09(1), Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
SCHEDULE ATTACHED			
NAME	CD POSES, FREDERIC M 101 COLUMBIA RD MORRISTOWN NJ 07962	1. NAME	☐ Change ☐ Addition
STREET ADDRESS		2. NAME	
CITY, STATE, ZIP		3. STREET ADDRESS	
NAME	VD HELFANT, MARTIN B 101 COLUMBIA RD MORRISTOWN NJ 07962	4. NAME	☐ Change ☐ Addition
STREET ADDRESS		5. NAME	
CITY, STATE, ZIP		6. STREET ADDRESS	
NAME	VT MATTHEWS, ROGER C 101 COLUMBIA RD MORRISTOWN NJ 07962	7. NAME	☐ Change ☐ Addition
STREET ADDRESS		8. NAME	
CITY, STATE, ZIP		9. STREET ADDRESS	
NAME	VSD SALISBURY, KEVIN M 101 COLUMBIA RD MORRISTOWN NJ 07962	10. NAME	☐ Change ☐ Addition
STREET ADDRESS		11. NAME	
CITY, STATE, ZIP		12. STREET ADDRESS	
NAME	V HUGHES, JAMES A 101 COLUMBIA RD MORRISTOWN NJ 07962	13. NAME	☐ Change ☐ Addition
STREET ADDRESS		14. NAME	
CITY, STATE, ZIP		15. STREET ADDRESS	
NAME	V WEIDMAN, DAVID 101 COLUMBIA RD MORRISTOWN NJ 07962	16. NAME	☐ Change ☐ Addition
STREET ADDRESS		17. NAME	
CITY, STATE, ZIP		18. STREET ADDRESS	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true, and qualify for the recognition stated in this filing. I further certify that the information included in 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 agent, and that I am qualified to execute this report as required by Chapter 11, Florida Statutes, and that my name appears on the list of officers, directors, or registered agent on an attachment with this filing.

SIGNATURE:

J.A. Hughes

**J.A. HUGHES
VICE PRESIDENT-TAXES**

MAY 15 1995

201-455-4037

