

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 # F94000005332 (1)

1. Corporation Name

IVARAN AGENCIES, INC.



Principal Place of Business

111 PAVONIA AVE.  
JERSEY CITY NJ 07310

Mailing Address

111 PAVONIA AVE.  
JERSEY CITY NJ 07310

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

29

9. Name and Address of Current Registered Agent

ALTMAN, STUART H  
100 SE 2ND ST., 17TH FLOOR  
MIAMI FL 33131

3. Date Incorporated or Qualified  
10/13/1994

3a. Date of Last Report  
07/10/1995

4. FEI Number  
13-3230495

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 in application

(NOTE: Registered Agent Signature required when reconstituting)

DATE:

12. OFFICERS AND DIRECTORS

TITLE VP/RE  
NAME HANSEN, KIM  
STREET ADDRESS 3 LAUREL DRIVE  
CITY-STATE-ZIP LONG VALLEY NJ

DELETE

TITLE SD  
NAME MADDY, ELMER C  
STREET ADDRESS 16 ROUND HILL RD.  
CITY-STATE-ZIP GREENWICH CT 06831

DELETE

TITLE D  
NAME DAHL, JENS  
STREET ADDRESS 21 LAURA LANE  
CITY-STATE-ZIP MORRISTOWN NJ 07960

DELETE

TITLE V  
NAME PICCIONE, CATALDO  
STREET ADDRESS 4 LILY CT.  
CITY-STATE-ZIP YORKTOWN HEIGHTS NY

DELETE

TITLE V  
NAME HURLEY, GARY  
STREET ADDRESS 31 SHIRA LANE  
CITY-STATE-ZIP MANALAPAN NJ

DELETE

TITLE V  
NAME HAMMER, GORDON  
STREET ADDRESS 159 OLD FARMERS RD.  
CITY-STATE-ZIP LONG VALLEY NJ

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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

3/29/96

201-798-5656

CR2E034 (12/95)