FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

801 COMMERCIAL AVE

CARLSTADT NJ 07072-2002

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # F9400006566 (3)

TEN HOEVE BROS., INC.

Principal Place of Business

601 COMMERCIAL AVE

CARLSTADT NJ 07072

SMELL ADDRESS.

appears in Block 12 or Block

SIGNATURE:

CITY - \$1, 20F

					3. Date Incorporated or Qualified	3a. Dat	e of Last Re	aport]
					12/22/1994	09/2	3/1996		
2. Principal P	lace of Business	2s. Mailing Address			4. FEI Number		Ap	plied For]
21	· · · · · · · · · · · · · · · · · · ·	26			22-2469056		No	t Applicable]
Suite, Apt	# ₁ €tc	Suite, Apt. #, etc			5. Certificate of Status Desired		\$8.75		1
22		27					Fee Re	quired	_
City & State	e	City & State			6. Election Campaign Financing		\$5.00		
23		28]	,		Trust Fund Contribution		Added t]
Zip Country		 		intry	8. This corporation has liability for i			199.032,	
24	25 9. Name and Address of Curre	ni Basistarad Asant	30	<u> </u>	Florida Statutes 10. Name and Address of New Re	Yes .		·····	-
L		iir uaðisralan wögur		81 Name	10. Name and Address of New He	Sisteled W	geni		┨
	TON, RICHARD		r	O1 Name					
4780 DISTRIBUTION DR				82 Street Add	ress (P.O. Box Number is Not Acceptab	ıle)			1
TAM	PA FL 33605			83					4
				03					
				84 City			85 Zip (Dode	1
				ļ. <u></u>		<u> </u>			1
11. Parsuarit	to the provisions of Sections 607.05 registered agent, or both, in the State	02 and 607.1508, Florida Statut e of Florida. Such change was	les, the a authorize	bove-named corp d by the corporal	poration submits this statement for the pation's board of directors. I hereby accept	urpose of a	changing it: intment as	s registered registered	
agenl ±a	m familiar with, and accept the oblig	gations of, Section 607.0505, Fi	orida Sta	tutes.					
SIGNATURE	· · · · · · · · · · · · · · · · · · ·		. <u></u>						
12.	Signature type not protect hand of registered as	nent and itse if applicable (NO) ND DIRECTORS	E Registere	d Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIDECTOR	0.111.40	1~
701.1	CPTD	DELETE	1.1 Ti	TI E	ADDITIONS/CHAINGES TO OFFIC	ENS AND	Change	Addition	CR2E034 (9/96)
NAME .	FRANK, PETER					L	Gridinge	Applificat	9
STECLE ADDRESS	601 COMMERCIAL AVE		1.2 N						8
1 :	CARLSTADT NJ 07072			TREET ADDRESS					띬
CHY-51 ZIF TURE	V	DELETE	2.1 1	TTY-ST-ZIP			Change	Addition	-1뜻
hami	•	Lad Ditter	2.1 N			L	Onange	L. J Addition	
'''	STEWART, KEITH A		,						
STREET AUGURESS	601 COMMERCIAL AVE			TREET ADDRESS					
CHY-ST-70P	CARLSTADT NJ 07072	DELETE	3,1 (1	TIE ST-ZIP			Change	I. Addition	-
NAME	KOMAR, RICHARD X J	L_ official	3.1 N				ominge	fr-1 Voluinu	
STREET ADDRESS	601 COMMERCIAL AVE								
1	CARLSTADT NJ 07072			TREET ADDRESS					
CHY+\$1+Zi#*	CARLSTADT NO UTUTZ	DELETE	3.4. C	TIF			Change	Addition	4
NAME		v.c.	4.21				~1 Ollarige	LI POUNDA	
STREET LADDRESS				TREET ADDRESS					1
1									
CITY-S1-7IF		DELETE	4.4 C 5.1 Ti	TY-ST-ZIP			Change	Addition	4
		F-1 DELETE				L	mt omnåe	L.,J MUUIIIVII	
NAME CALCAL AN AGEN			5.2 N						
STREET ADDRESS				TREET ADDRESS					
CHY-SI ZII		DELETE		11Y - \$1 - 7IP			Change	(delitie -	4
THILE		TTI DETEIF	6.1 TI			L	Change	Addition	
NAME			6.2 N	AME					1

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do hereby certily that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 flagor poration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name