

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 # F95000001322 (5)

1. Corporation Name

ARCHER MANAGEMENT SERVICES, INC.



Principal Place of Business

Mailing Address

855 AVENUE OF THE AMERICAS
NEW YORK NY 10001

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NEW YORK NY 10001

3. Date Incorporated or Qualified

03/20/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

13-3548353

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

UNITED CORPORATE SERVICES
801 NORTHEAST 167TH STREET SUITE 300
NORTH MIAMI BEACH FL 33162

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 Member if applicable)

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PCEO ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME KATZ, STANLEY
STREET ADDRESS 700 PARK AVENUE
CITY-STATE-ZIP NEW YORK NY 10021

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE S ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME KATZ, JUDITH
STREET ADDRESS 700 PARK AVENUE
CITY-STATE-ZIP NEW YORK NY 10021

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

TITLE V ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition

NAME MACKAY, STEPHEN
STREET ADDRESS 280 REDMOND RD
CITY-STATE-ZIP SOUTH ORANGE NJ 08742

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

TITLE V ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition

NAME BARANSKY, WALTER
STREET ADDRESS 1139 BRADFORD DRIVE
CITY-STATE-ZIP PT PLEASANT NJ

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

TITLE V ☐ DELETE

5.1 TITLE ☐ Change ☐ Addition

NAME WEINER, MITCHELL
STREET ADDRESS 26 FORTUNE LANE
CITY-STATE-ZIP JERICO NY 11753

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☒ Addition

NAME
STREET ADDRESS
CITY-STATE-ZIP

6.2 NAME V
6.3 STREET ADDRESS PATRICIA DUPUIS
6.4 CITY-STATE-ZIP 1235 Herbert Place
Hewlett, NY 11557

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, DIRECTOR

Pres/CEO

Date

2/27/96

Daytime Phone #

CR2E034 (12/95)