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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS F95000005668 (7)

DOCUMENT #
1. Corporation Name INDIAN RIVER MAGNETICS, INC.

HUMN	NIVER MAGNETIOS, INC.						
Principal Place o	of Business	Mailing Address			, tentes significant and a significant		
C/O LF MANAGMENT ASSOCIATES, LTD. C/O LF MANAGMENT AS 500 EXECUTIVE BOULEVARD 500 EXECUTIVE BOULEV				S. LTD.			
OSSINING NY	7 10562	OSSIMING NY 10562			3. Date Incorporated or Qualified 11/20/1995	3a. Date of Last Report	
2. Principal Plac	ce of Business	2a. Mailing Address 26			4. FEI Number 13-3849235	Applied For Not Applicable	
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		Oity & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Coun	try	8. This corporation has liability for in Florida Statutes		
24	25	[29]	30		Florida Statutes Y Yes  10. Name and Address of New Re		
	9. Name and Address of Curren	it Registered Agent		Name	IV. Name and Address of New Ne	gistored Agent	
THE PRENTICE-HALL CORPORATION SYSTEM, INC.					ddress (P.O. Box Number is Not Acceptable)		
1201 HA SUITE 19	NYS STREET 05		1	33			
TALLAHASSEE FL 32301			(	34 City	. 4 - 48/4 14/4	FI 85 Zip Code	
SIGNATURE	n, and accept the obligations of, Sect Signalize hipsile production disclosing dis-			gen sign om te i in	d where estated  ADDITIONS/CHANGES TO OFFICE	DATE DERS AND DIRECTORS IN 12	
TITLE	PCS	☐ DELETE	1 1 1 1	LE		Change Addition	
NAME	KALMANOWITZ, STUART		1.2 NA	A:		!	
STREET ADDRESS	500 EXECUTIVE BLVD.		13518	EFT ADDRESS			
CITY-ST ZIP	OSSINING NY 10562		1400	Y - S.f - ZiP			
TITLE	T	DELETE	2 1 101	LF.		Change Addition	
NAME	PRZONEK, RICHARD		2 2 NAI	ΜE			
STREET ADDRESS	500 EXECUTIVE BLVD.		23 STF	KEET ADDRESS			
CITY - ST - ZIP	OSSINING NY 10562	FI POLETE		Y - \$1 - ZIF	<b>80000175</b> -04/29/96010	Addition	
TITLE	VC	☐ DELETE	3 1 111	1		780 <del>2</del> 3 - 1	
NAME	WEINSTEIN, HARVEY		3 2 NA	i	***200.00		
STREET ADDRESS	107 TURNBULL ST.			REFLADDRESS			
CITY-ST-ZIF	ELIZABETH NJ 07206	☐ DELETE	4 1 TIT	Y - ST - Z-P		Change Addition	
TITLE	COSENTINO, LOUIS A	L'3 brien	4 2 NA	i			
NAME	25 HILLCREST ROAD			KEFT ADDRESS			
STREET ADDRESS	WOODCLIFF LAKE NJ 0767	5	B B	1 - S1 - ZIP	101		
CITY-ST-ZIP TIFLE	110000111 Bitt 100101	[] DELETE	5 1 11		$\frac{1}{\sqrt{1-\frac{1}{2}}}$	Grange Addition	
NAMÉ		baard	5.2 NA		11281 7	(111)	
STREET ADDRESS			5331	REET ADDRESS	41 7	JIM \	
CITY-S1-ZIP				Y-SI-7P	1, (	N	
TITLE		☐ DELETE	8 1 Tr			☐ Change ☐ Addition	
h and			6.2 NA	ME			

6.3 STREET ADDRESS

6.4 City - ST - ZiP

STREET ADDRESS

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

14. To hereby certify that the information supplied with this filling is voluntarity 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 13 if changed, or on an attachment with an address. 4/25/96 (914)923.4300