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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F95000005980

1. Corporation Name MIDTOWN, INC.

FILED Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90025 012 ***150.00



Principal Place of Business Mailing Address						1 (851188 (1)8)2(8) (1)11 (8611) (8611) (8611) (8611) (8611)	
540 DUDLEY CT	540 DUDLEY CT 540 DUDLEY COURT						
WESTFIELD NJ 07090 WESTFIELD NJ 07090							DO NOT WRITE IN THIS SPACE
US US						3. Date Incorporated or Qualified	
							12/08/1995
0 D-111 D	Is a of Dusings	20.1	Apiling Address				4. FEI Number Applied For
—	lace of Business	_	Mailing Address				22-3362617 Not Applicable
21 Cuito Ant	# oto	26	Suite, Apt. #, etc.		-		\$8.75 Additional
			oute, Apr. #, oto.	C .			5. Certificate of Status Desired Fee Required
City & State			City & State				6. Election Campaign Financing 55.00 May Be
			ony w onaid	& Clair			Trust Fund Contribution Added to Fees
Zip	Country		(ip	Count	trv		This corporation owes the current year Intangible
24	25	29		30	•		Personal Property Tax.
	9. Name and Address of Curre		red Agent	1001	_	* ***	10. Name and Address of New Registered Agent
		<u> </u>			31	Name	
CORPORATION SERVICE COMPANY				L.	-		(D.O. Davidson in New Assessments)
1201 HAYS STREET				'	32	Street Addre	ess (P.O. Box Number is Not Acceptable)
TALL	AHASSEE FL 32301-2525			1	33		<u> </u>
				8	34	City	Fi 85 Zip Code
11 Purguant	to the provisions of Sections 607.0	502 and 607	1508 Florida Statut	es the abo	DV R	-named corpo	oration submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the Stat	te of Florida.	. Such change was a	uthorized I	by t	the corporation	on's board of directors. I hereby accept the appointment as registered
agent. I a	m familiar with, and accept the obliq	gations of, S	section 607.0505, Fig	nda Statut	es.		
SIGNATURE	Signature, typed or printed name of registered a	nent and title if a	onlicable (NOTE	Registered A	nent	signature required	d when reinstating) DATE
12.	OFFICERS A			13.	90.1	. arginataro rodense	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DPST		☐ DELETE	1.1 TITU	E		Change Addition
NAME	DYER, STEPHEN R			1.2 NAM			
	540 DUDLEY CT			- E		ADDRESS	
STREET ADDRESS	WESTFIELD NJ 07090			14 CITY			
CITY-ST-ZIP TITLE	WEST IEED IN 07030		☐ DELETE	2.1 TITL		-211	☐ Change ☐ Addition
				2.2 NAW			
NAME				•		1000000	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP			☐ DELETE	2.4 CIT		T- ZIP	☐ Change ☐ Addition
TITLE							
NAME				3.2 NAM		***************************************	. سو باختيادون
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP		·	☐ DELETE	3.4. CIT		1-ZIP	Change Addition
TITLÉ			- DELETE		_		
NAME				4. 2 NAN			
STREET ADDRESS				1		ADORESS	
CITY-ST-ZIP			Doctor	4.4 CITY		-ZIP	☐ Change ☐ Addition
TITLE			☐ DELETE	5.1 TITL			CT change CT Addition
NAME				5.2 NAM		ADDDEED	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP			O	5.4 CITY		- ZiP	Change CAJIE
TITLE			☐ DELETE	6.1 TITL			☐ Change ☐ Addition
NAME				6.2 NAM			
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP				6.4 CITY	-ST	-ZIP	

14. I hereby certify 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 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, with all other like empowered.

SIGNATURE:

TYPED OR PRINTED LIME OF SIGNING OFFICER OR DIRECTOR