

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED
AND
FILED

1997 JUL 25 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000000822 (4)

1. Corporation Name

HOFFMAN & GENCARELLI, P.C.

Principal Place of Business

99 PONDFIELD RD
BRONXVILLE NY 10708

Mailing Address

99 PONDFIELD RD
BRONXVILLE NY 10708

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/19/1996

3a. Date of Last Report

2. Principal Place of Business

21 170 MASON STREET

Suite, Apt. #, etc.

22

City & State

23 GREENWICH CT.

Zip

24 06830

Country

2a. Mailing Address

26 170 MASON STREET

Suite, Apt. #, etc.

27

City & State

28 GREENWICH, CT.

Zip

29 06830

Country

30

4. FEI Number

13-3011394

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

LEVY, STEVE V
915 MIDDLE RIVER DR
FT LAUDERDALE FL 33304

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME CPD
STREET ADDRESS HOFFMAN, SHELDON
CITY-ST-ZIP 99 PONDFIELD RD
BRONXVILLE NY 10708

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

CPD
HOFFMAN, SHELDON
170 MASON STREET
GREENWICH, CT 06830

☒ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

300002258203--2

-08/05/97--01075--011

***165.00 ***165.00

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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.

SIGNATURE

Sheldon Hoffmann

Sheldon Hoffmann

CR2E034 (4/97)

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HOFFMAN & GENCARELLI, CPA's, PC

Certified Public Accountants
170 Mason Street
Greenwich, CT 06830
Tel # 203 661-2234 / Fax 661-2239



500 Fifth Avenue
Suite 1950
New York, NY 10110

July 21, 1997

915 Middle River Drive
Suite 309
Ft. Lauderdale, FL 33304

Division of Corporations
Annual Reports Section
PO Box 1500
Tallahassee, FL 32302-1500

Re: Hoffman & Gencarelli, PC
FEI: 13-3011394

To whom it may concern:

Please be advised that we have received a second notice for the 1997 Profit Corporation Annual Report. However, we never received the first notice for this report, nor have we received any other correspondence on this matter. In this regard, we respectfully request that the penalty for late filing of \$ 385.00 be waived.

Enclosed please find our completed 1997 Profit Corporation Annual Report and a check in the amount of \$ 165.00 (\$ 61.25 annual report fee and \$ 103.75 corporation supplemental fee).

Please be advised that any future correspondence should be directed to our main office:

Sheldon Hoffman
President
Hoffman & Gencarelli, PC
170 Mason Street
Greenwich, CT 06830

Thank you for your attention to this matter.

Sincerely,

A handwritten signature in cursive script that reads 'Sheldon A. Hoffman'.

Sheldon Hoffman
President

SAH:tas
enc.