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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996	DIVISION OF (CORPORATIONS		
1. Corporation		()			
IHE M	IALL AT THE GALAXY, INC	•		A TOPHON DEM BANK BAKE IDION NON	D KANA ANDRA DIGAN BIGAN ANDRA DIGAN BIGAN KADAN
Principal Place	of Business	Mailing Address			
7000 BOULEVARD EAST		•			
GUTTENBERG NJ 07093		7000 BOULEVARD EAST GUTTENBERG NJ 07093			
				3. Date Incorporated or Qualified	3a. Date of Last Report
				04/26/1984	11/13/1995
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		22-2533164	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30	Florida Statutes Yes	-
	9. Name and Address of Curren	t Hegistered Agent	81 Name	10. Name and Address of New Ro	egistered Agent
CT COD	DODATION SYSTEM				<u></u>
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			82 Street Add	ress (P.O. Box Number is Not Acceptabl	e)
	TION FL 33324		83		
			84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607.050?	and 607.1508, Florida Statuter	s, the above named corpo	ration submits this statement for the purp ird of directors. Thereby accept the appo	ose of changing its registered office
familiar with	n, and accept the obligations of Secti	on 607.0505, Florida Statutes	u by the corporation's boa	iro or directors. Thereby accept the appo	intment as registered agent. Lans
SIGNATURE					
12.	Signature, typed or printed name of registered agout OFFICERS AND		Fig. fored Agent agradum require 13.	ad when reneficings ADDITIONS/CHANGES TO OFFIR	DATE
TITLE	COO	DELETE	1 1 Till F	ADDITIONS CHANGES TO OFFI	Change
NAMÉ	MENONNA, NICHOLAS JR.		1.2 NAME		
STREET ADDRESS	7000 BOULEVARD E		1.3 STREET ADDRESS		
DITY-ST-ZIP	GUTTENBERG NJ		1.4 CI*Y - Si - ZIP		
TITLE	CFO	☐ DELETE	2 1 THILE		☐ Change ☐ Addition
NAME	SERGI, MARTIN J.		2.2 NAME		
STREET ADDRESS	7000 BOULEVARD E.		2.3 STREET ADDRESS		
CITY-ST-ZIP	GUTTENBERG, NJ.	E) po exc	2.4 CITY - ST - ZIP		
TITLE NAME		☐ DELETE	3 1 TIBLE		Change Addition
STREET ADORESS			3 2 NAME		
CITY-ST-ZIP			3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	•	
TIFLE		DELETE	4 1 11 LE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY - ST - ZIP			4.4 CITY - ST - ZiP		
TITLE		☐ DELETE	5 1 TIFLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-SI-ZIP		F) belefe	5 4 C:TY - ST - ZiP		
TITLE NAME		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
STREET ADDRESS			6.2 NAME 6.3 STHEET ADDRESS		
CITY-SI-ZIP			6 4 City-St-Zip		
011 01 211			■ 04 O11 - 31 - 21F		

1 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 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 this tee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 or changed, or on an attachment with an individual.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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SIGNATURE:

CR2E034 (12/95)