

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # J81722 (7)

1. Corporation Name

DEERFIELD BEACH, FL., L.T., INC.



Principal Place of Business

6 BRIGHTON RD.
P.O. BOX 5108
CLIFTON NJ 07015

Mailing Address

6 BRIGHTON RD.
P.O. BOX 5108
CLIFTON NJ 07015

3. Date Incorporated or Qualified

07/09/1987

3a. Date of Last Report

04/05/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

22-2857656

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

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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 street address

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DP
AXELROD, NORMAN
6 BRIGHTON ROAD
CLIFTON NJ

☐ DELETE

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

V
GILES, WILLIAM
6 BRIGHTON ROAD
CLIFTON NJ

☐ DELETE

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
RICHARDS, ARTHUR V.
ONE THEALL RD.
RYE NY

☐ DELETE

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
SHAHID, QURAESHI
ONE THEALL RD.
RYE NY

☒ DELETE

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

S
DICK, DAVID
6 BRIGHTON RD.
CLIFTON NJ

☐ DELETE

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D
BRENNAN, MICHAEL
ONE THEALL RD.
RYE NY

☒ DELETE

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

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TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID DICK

1-25-96

201 778 1308

Date

Daytime Phone #

CR2E034 (12/95)