

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

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May 02 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **M29037** (2)
1. Corporation Name
CASE TECHNOLOGIES CORPORATION



Principal Place of Business
**5951 BAYVIEW DRIVE
#209
FT. LAUDERDALE FL 33308-2739**

Mailing Address
**35 BROOKSIDE DRIVE
UPPER SADDLE RIVER NJ 07458-1800**

3. Date Incorporated or Qualified **03/18/1986** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. Filing Number 223424088	Applied For Not Applicable
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent BHOJAKOMAR KONANOR S. 5951 BAYVIEW DRIVE #209 FT. LAUDERDALE FL 33308	10. Name and Address of New Registered Agent 81 Name ADRIANE CHATTERTON 82 Street Address (P.O. Box Number is Not Acceptable) 195 CHADWICK ROAD 83 TEANECK NJ 84 City FT. Lauderdale FL 85 Zip Code 33308
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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 *Adriane Chatterton* (NOTE: Registered Agent signature required when reinstating) DATE **4/23/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BHOJAKOMAR, KONANOR	1.2 NAME	
STREET ADDRESS	35 BROOKSIDE DRIVE	1.3 STREET ADDRESS	
CITY - ST - ZIP	UPPER SADDLE RIVER NJ 07458	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHATTERTON, ALICIA	2.2 NAME	CHATTERTON, ALICIA
STREET ADDRESS	195 CHADWICK RD.	2.3 STREET ADDRESS	195 CHADWICK ROAD
CITY - ST - ZIP	TEANECK NJ 07666	2.4 CITY - ST - ZIP	TEANECK, NJ 07666-4205
TITLE	NEK	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	CHATTERTON, ADRIANE
STREET ADDRESS		3.3 STREET ADDRESS	195 CHADWICK ROAD
CITY - ST - ZIP		3.4 CITY - ST - ZIP	TEANECK NJ 07666-4205
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	CHATTERTON, Keith
STREET ADDRESS		4.3 STREET ADDRESS	195 CHADWICK ROAD
CITY - ST - ZIP		4.4 CITY - ST - ZIP	TEANECK NJ 07666-4205
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

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: *Adriane Chatterton* DATE **4/23/97** 800-275-2437

CR2E034 (9/96)