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PROFIT CORPORATION ANNUAL REPORT

1996



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

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. Corporation		\ \	,				
AURORA MANAGEMENT CORPORATION				 	HANDA ANDAL AND	IRIN AJAN AKAN KADI	
Principal Place	of Business	Mailing Address	, <u></u>				
	ARK AVENUE VILLE NJ 08109	23 WEST PARK AV MERCHANTVILLE N					
					3. Date Incorporated or Qualified	3a. Date of Last	Report
9 5		· · · · · · · · · · · · · · · · · · ·			11/12/1985	04/18/1	•
z, Principal Pa 1	ace of Business	2a. Mailing Address			4. FEI Number 22-2495455		Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				- \$8.7	Not Applicable 5 Additional
City & State		27			5. Certificate of Status Desired	1 1	Required
3		City & State			Election Campaign Financing Trust Fund Contribution		00 May Be led to Fees
Zip 4	Country 25	Zıp 29	Count 30	try	8. This corporation has liability for Florida Statutes	intangible tax under	s 199.032,
	9. Name and Address of Curr		30		10. Name and Address of New F		
	_		8	11 Name			
	RPORATION SYSTEM PINE ISLAND ROAD		8	2 Street Add	ress (P.O. Box Number is Not Acceptab	ole)	
	TION FL 33324		8	13			
				4 City	· · · · · · · · · · · · · · · · · · ·		
			•	4 City			Zip Code
I1. Pursuant to	o the provisions of Sections 607.05	02 and 607.1508, Florida Stat	utes, the above	e-named corpo	ration submits this statement for the nur	roose of changing its	registered office
familiär witl SIGNATURE	h, and accept the obligations of, Se	ction 607.0505, Florida Statut	es.	iporadori s boa	ration submits this statement for the pur ard of directors. I hereby accept the app	ontment as registere	registered office d agent. I am
familiär witl SIGNATURE	h, and accept the obligations of, Se Signature, typed or printed name of registered ag-	ction 607.0505, Florida Statut	urtes, the above rized by the cores.	iporadori s boa	ind or directors. Thereby accept the application of the constating.	DATE	d agent. I am
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Treasurer 4/8/96 609662:1116