

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 JUL 11 AM 9:08

DOCUMENT # P09459 (9)

1. Corporation Name

VILLEROY & BOCH TABLEWARE, LTD. INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

800001536308
-07/12/95--01087--011
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE.

Principal Place of Business Mailing Address
5 VAUGHN DR.
#303
PRINCETON NJ 08540
US

3. Date Incorporated or Qualified 03/19/1986 3a. Date of Last Report 07/26/1994

4. FEI Number 13-1962067 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country

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

01 Name
02 Street Address (P.O. Box Number is Not Acceptable)
03
04 City FL 05 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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P
NAME SWEATT, SAFFORD
STREET ADDRESS 5 VAUGHN DR.
CITY - ST - ZIP PRINCETON NJ
TITLE SD
NAME BEHRENTROTH, ROLF
STREET ADDRESS 5 VAUGHN DR.
CITY - ST - ZIP PRINCETON NJ
TITLE AS
NAME SCORSONE, FRANCESCA
STREET ADDRESS 600 MADISON AVE
CITY - ST - ZIP NEW YORK NY
TITLE D
NAME VON BOCH, WENDEUN
STREET ADDRESS 5 VAUGHN DRIVE
CITY - ST - ZIP PRINCETON NJ
TITLE AS
NAME PAVIA, GEORGE M.
STREET ADDRESS 600 MADISON AVE.
CITY - ST - ZIP NEW YORK NY
TITLE EVP
NAME PACCAPANICCIA, VINCENT
STREET ADDRESS 5 VAUGHN DRIVE
CITY - ST - ZIP PRINCETON NJ

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I 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)(b), 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 changing) or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V.A. PACCAPANICCIA

Date

(Type Name)