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Jan 21 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 # P09459 (9)

1. Corporation Name
VILLEROY & BOCH TABLEWARE, LTD. INC.



Principal Place of Business

5 VAUGHN DR.
#303
PRINCETON NJ 08540
US

Mailing Address

5 VAUGHN DR.
#303
PRINCETON NJ 08540-8313
US

3. Date Incorporated or Qualified
03/19/1986

3a. Date of Last Report
01/30/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

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

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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 and printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME SCHALLS, PHILIPPE
STREET ADDRESS 5 VAUGHN DR
CITY- ST- ZIP PRINCETON NJ ☐ DELETE

TITLE SD
NAME BEHRENTROTH, ROLF
STREET ADDRESS 5 VAUGHN DR.
CITY- ST- ZIP PRINCETON NJ ☐ DELETE

TITLE AS
NAME SCORSONE, FRANCESCA
STREET ADDRESS 600 MADISON AVE
CITY- ST- ZIP NEW YORK NY ☐ DELETE

TITLE D
NAME VON BOCH, WENDEUN
STREET ADDRESS 5 VAUGHN DRIVE
CITY- ST- ZIP PRINCETON NJ ☐ DELETE

TITLE AS
NAME PAVIA, GEORGE M.
STREET ADDRESS 600 MADISON AVE.
CITY- ST- ZIP NEW YORK NY ☐ DELETE

TITLE EVP
NAME REUTER, BERNARD
STREET ADDRESS 5 VAUGHN DRIVE
CITY- ST- ZIP PRINCETON NJ ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME PHILIPPE SCHALLS
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 WENDELIN VON BOCH
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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #

1/8/97

(609) 734-7800

CR2E034 (9/96)