


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 02, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P17807</b> 1. Entity Name FUJI HUNT PHOTOGRAPHIC CHEMICALS, INC.	
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Principal Place of Business 40 BOROLINE RD ALLEDALE, NJ 07401	Mailing Address 40 BOROLINE RD ALLEDALE, NJ 07401
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02082006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 06-1223789	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

**6. Name and Address of Current Registered Agent**

KEARNEY, TIM  
50 INDUSTRIAL LOOP NORTH  
ORANGE PARK, FL 32073

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

*Tim Kearney*

Signature, typed or printed name of registered agent and date if applicable

(NOTE: Registered Agent signature required when reinstating)

2/21/06

Date

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P AERTS, ALBERT A 40 BOROLINE RD ALLEDALE, NJ 07401
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	TV ESCARAVAGE, STEVEN M 40 BOROLINE RD ALLEDALE, NJ 07401
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FILE, JONATHAN 200 SUMMIT LAKE DR VALHALLA, NY 105951356
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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	
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000000452900  
03/13/06 80018-014 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Steven M. Escaravage*

2/21/06

Date

Daytime Phone #