

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P21307 (4)

1. Corporation Name

THE HARTZ GROUP, INC.



Principal Place of Business

Mailing Address

ATTENTION: F. ROSCITT
400 PLAZA DRIVE
SECAUCUS NJ 07094-3688
US

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400 PLAZA DRIVE
SECAUCUS NJ 07094-3688
US

3. Date Incorporated or Qualified 10/17/1988	3a. Date of Last Report 04/07/1995
4. FEI Number 22-2576954	Applied For Not Applicable
5. Certificate of Status Desired <input 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> 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
25	30

9. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES, INC.
801 NORTHEAST 167TH STREET
SUITE 305
NORTH MIAMI BEACH FL 33162

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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and if not applicable, _____

Signature, typed or printed name of registered agent, and if not applicable, _____

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PCD STERN, LEONARD N. 925 FIFTH AVENUE NEW YORK NY	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	
CITY-STATE-ZIP		14 CITY-STATE-ZIP	10021
TITLE	VD SCHWARTZ, CURTIS B. PARKVIEW ROAD POUND RIDGE NY	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-STATE-ZIP		24 CITY-STATE-ZIP	10576
TITLE	VS MAGGIOTTO, LOUIS 700 FRANK E. RODGERS BLVD. SO. HARRISON NJ	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	MAGGIOTTO, LOUIS
STREET ADDRESS		33 STREET ADDRESS	400 PLAZA DRIVE
CITY-STATE-ZIP		34 CITY-STATE-ZIP	SECAUCUS, NJ 07094-3688
TITLE	V ROSCITT, FRANK E. 400 PLAZA DRIVE SECAUCUS NJ	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-STATE-ZIP		44 CITY-STATE-ZIP	07094-3688
TITLE	D STERN, EDWARD 700 FRANK E. RODGERS BLVD. SOUTH HARRISON NJ	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	400 PLAZA DRIVE
CITY-STATE-ZIP		54 CITY-STATE-ZIP	SECAUCUS, NJ 07094-3688
TITLE	D STERN, EMANUEL 400 PLAZA DRIVE SECAUCUS NJ	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-STATE-ZIP		64 CITY-STATE-ZIP	07094-3688

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)(k), 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: *Frank E. Roscitt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP 4/11/96 (701) 617-1009
Date Expiring Date

Frank E. Roscitt

CR2E034 (12/95)