FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P28025 (5)

MILLAR ELEVATOR SERVICE COMPANY

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FILED

May 13 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address						- -	ir dibih Babh Andir Bibir	93011 DIQIL 1001	
20 WHIPPANY RD. TAX DEPARTMENT MORRISTOWN NJ 07980		P.O. BOX 1935 MORRISTOWN NJ 07962-1935 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						02/07/1990			
2. Principal Place of Business		2a. Mailing Address			l 		Applied For		
21		26 20 Whippany Rd			51-0324653				
Suite, Apt #, etc.	Sui [27]	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required				
City & State		City & State 28 Morristown NJ			J	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip Country		Zip Country				8. This corporation owes or has paid the current year Intangible			
24 25	29 🕜	7960	30	US		Personal Property Tax due June	_	≥ No	
9. Name and Address of Current F		· · · · · · · · · · · · · · · · · · ·			10. Name and Address of New Registered Agent				
CT CORPORATION SYSTEM 81 Name									
1200 S. PINE ISLAND ROAD				82 Stre	et Addre	ss (P.O. Box Number is Not Acceptab	ile)		
PLANTATION FL 3	3324								
				83					
				84 City			—. 85 2	Zip Code	
							FL	·	
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 Storwitzer, typed or paided name of registerist agent and tile it applicable (NOTE Registered Agent signature required when reinstating) DATE									
Signature, typed or protest name of reguleror ager Land tile of applicable. (NOFE 12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECT	ORS IN 12	
TITLE D	COTTO TO THE COUNTY	DELETE	111	TLE		ADDITIONS, OFFICE TO CITTO	Chan		
NAME RUTTIMANN	FRANZ		12 N		İ				
STREET ADDRESS CORPORATE HEADQUARTERS				1.3 STREET ADDRESS					
CITY-ST-ZIP EBIKON-LUZERNE, SWITZERLAND			1.4 CITY-S1-ZIP						
TOTLE PT		DELETE	211				☐ Chan	ge Addition	
NAME KARNASH, J	OHN S.M.		2.2 NAME		ı				
STREET ADDRESS 20 WHIPPANY RD.			2.3 STREET ADDRESS		s				
CITY-ST-ZIP MORRISTON	/N NJ 07960		2 4 CHY-ST-ZIP		1				
TITLE VS		DELETE	3.1 TI	TLE	1		☐ Chan	ge 🔲 Addition	
NAME GISSER, STI			3 2 N	AME					
STREET ADDRESS 20 WHIPPANY RD.			3 3 STREET ADDRESS		S				
CITY-ST-ZIP MORRISTON	/N NJ 07980		3.4. 0	ITY-ST-ZIP					
TITLE		☐ DELETE	4.1 TI	TLE	1		☐ Chan	ge LAddition	
NAME			4.2 N						
STREET ADDRESS			4.3 S	REET ADDRES	is				
CITY-ST-ZIP	<u>. </u>			TY-S1-ZIP				- Lauren	
TITLE		DELETE	5.1 TI				☐ Chan	ge 🔲 Addition	
NAME			5.2 N						
STREET ADDRESS				REET ADDRES	is				
CITY-ST-ZIP		DELETE		1Y-S1-ZIP			☐ Chan	ge Addition	
TITLE		LJ DECETE	6.1 TI				L CIMI	ac T Vocation	
NAME			6.2 N						
STREET ADDRESS				REET ADDRES) b				
CITY-ST-ZIP	rmation supplied with this filing	does not qualify t		TY-ST-ZIP emption s	ated in S	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 reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter 607 on an attachment with an address