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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

William S. sa

これによることにいいますの事をはいから、小麦の大麦の地方、「またいか、ことがない」の最かある事を事を表示しているという。



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P28479

(4)

POMER	ANTZ PAYROLL SYSTEMS	s, INC.			110)   8/8 1 8/8 1 8/8  <b>3</b>  10)   8/8 1 8/8 1
Principal Pla	ce of Business	Mailing Address		-	
1375 PLAINFIELD AVE 1375 PLAINFIELD AVE					
WATCHUNG N	3 07080	WATCHUNG NJ 07080-5482			
				3. Date Incorporated or Qualified 03/13/1990	3a. Date of Last Report 03/26/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.	**************************************	22-2997375	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25 9. Name and Address of Curr	rent Registered Agent	30	Florida Statutes  10. Name and Address of New Reg	Yes No
THE	PRENTICE-HALL CORPORATION	···	81 Name	TO. Name and Address of New Re	distated Agent
	1 HAYS STREET	on ordicm inc.			
SUITE 105			82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)
	LAHASSEE FL 32301		83		
			84 City		Section Control
			[ ] - 7		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the p pion's board of directors. I hereby accep	urpose of changing its registered
agent. I	am familiar with, and accept the obl	ligations of, Section 607.0505, Flor	ida Statutes.	norts board or offectors. Thereby accep	t the appointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered.	agent and title Lapplicable (NOTE: AND DIRECTORS	Registered Agent signature require		DATE
TITLE	PTD	DELETE	1.1 TOLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	POMERANTZ, GARY		1.2 NAME		
STREET ADDRESS	1375 PLAINFIELD AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	WATCHUNG NJ		1.4 CHY-SI-ZIP		
TITLE	8	DELETE	2 1 HILE		Change Addition
NAME	KELLY, JAMIE		2 2 NAME		
STREET ADDRESS	1375 PLAINFIELD AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	WATCHUNG NJ		2. 4 C(TY-ST-Z)P		
TITLE	D	☐ DELETE	3.1 1ITLE		Change Addition
NAME	POMERANTZ, GARY		3.2 NAME		
STREET ADDRESS	55 JARED COURT		3.3 STREET ADDRESS		
CITY-ST-ZIP	WATCHUNG NJ	D DC/ Pag	3.4. C(TY+ST+ZIP		
TITLE	COB POMEDANTZ CADY	[_] DELETE	4.1 TITLE		Change Addition
NAME DEDECT ADDRESS	POMERANTZ, GARY 1375 PLAINFIELD AVE		4. 2 NAME		
STREET ADDRESS	WATCHUNG NJ		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	WATOHONG NO	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		La Diccit	5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TRLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	6.4 CITY-ST-7IP		

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 comporation or the regely/ir or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 or Block 13 or changed, or on an attachment with an address.

**FILED** 

Apr 25 1997 8:00am

Secretary of State