

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P30597 (9)**
1. Corporation Name
VITARROZ CORP.



Principal Place of Business: **51 PACIFIC AVENUE JERSEY CITY NJ 07304-3215**
Mailing Address: **51 PACIFIC AVENUE JERSEY CITY NJ 07304-3215**

3. Date Incorporated or Qualified: **08/17/1990**
3a. Date of Last Report: **04/06/1995**
4. FEI Number: **22-2935140**
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **CT CORPORATION SYSTEM, 1200 S. PINE ISLAND ROAD, PLANTATION FL 33324**
10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, State (FL), and 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: _____ (NOTE: Registered Agent signature required when not stating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: P	NAME: FEDER, ALLAN A.	1.1 TITLE	
STREET ADDRESS: 51 PACIFIC AVE.		1.2 NAME	
CITY-ST-ZIP: JERSEY CITY NJ		1.3 STREET ADDRESS	
TITLE: SD	NAME: ABRAMSON, JAY B.	1.4 CITY-ST-ZIP	
STREET ADDRESS: 520 MADISON AVE.		2.1 TITLE	
CITY-ST-ZIP: NEW YORK NY		2.2 NAME	
TITLE: D	NAME: ABRAMSON, EDWIN D.	2.3 STREET ADDRESS	
STREET ADDRESS: 85 LIVINGSTON AVE.		2.4 CITY-ST-ZIP	
CITY-ST-ZIP: ROSELAND NJ		3.1 TITLE	
TITLE: VICE PRESIDENT	NAME: ZVI WEINBERG	3.2 NAME	
STREET ADDRESS: 51 PACIFIC AVE.		3.3 STREET ADDRESS	
CITY-ST-ZIP: JERSEY CITY NJ 07304		3.4 CITY-ST-ZIP	
TITLE	NAME	4.1 TITLE	
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
TITLE	NAME	4.4 CITY-ST-ZIP	
STREET ADDRESS		5.1 TITLE	
CITY-ST-ZIP		5.2 NAME	
TITLE	NAME	5.3 STREET ADDRESS	
STREET ADDRESS		5.4 CITY-ST-ZIP	
CITY-ST-ZIP		6.1 TITLE	
TITLE	NAME	6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *[Signature]* DATE: **3/20/96** 201 433-2600

CR2E034 (12/95)