

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Shirley B. Mathias
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P35782** (2)

1. Corporation Name

FARBERWARE INC.

Principal Place of Business

**1500 BASSETT AVENUE
BRONX NY 10461**

Mailing Address

**1500 BASSETT AVENUE
BRONX NY 10461**



2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.
22 City & State
23 Zip
24 Country
25
26 State, Apt. #, etc.
27 City & State
28 Zip
29 Country
30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 607.08(2) and 607.15(1)(b), 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. The registrant, except the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.08(4), Florida Statutes.

SIGNATURE

Signature of the Registrant

Signature of the Registered Agent

Date

12. OFFICERS AND DIRECTORS

1. TITLE: **P** [] DELETE
2. NAME: **CAMERON, PETER B.**
3. STREET ADDRESS: **1500 BASSETT AVENUE**
4. CITY, STATE, ZIP: **BRONX NY**
5. TITLE: **VCT** [] DELETE
6. NAME: **HUTCHISON, RONALD**
7. STREET ADDRESS: **1500 BASSETT AVENUE**
8. CITY, STATE, ZIP: **BRONX NY**
9. TITLE: **VSD** [] DELETE
10. NAME: **HEMPSTEAD, GEORGE H., III**
11. STREET ADDRESS: **99 WOOD AVE. SOUTH**
12. CITY, STATE, ZIP: **ISELIN NJ**
13. TITLE: **CS** [] DELETE
14. NAME: **WARREN, ANDREW L**
15. STREET ADDRESS: **1500 BASSETT AVE**
16. CITY, STATE, ZIP: **BRONX NY**
17. TITLE: **VP** [] DELETE
18. NAME: **HALL, JAMES**
19. STREET ADDRESS: **1500 BASSETT AVE**
20. CITY, STATE, ZIP: **BRONX NY**
21. TITLE: **AVP** [] DELETE
22. NAME: **FOLEY, DANIEL**
23. STREET ADDRESS: **1500 BASSETT AVE**
24. CITY, STATE, ZIP: **BRONX NY**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE: [] Change [] Addition
2. NAME: [] Change [] Addition
3. STREET ADDRESS: [] Change [] Addition
4. CITY, STATE, ZIP: [] Change [] Addition
5. TITLE: [] Change [] Addition
6. NAME: [] Change [] Addition
7. STREET ADDRESS: [] Change [] Addition
8. CITY, STATE, ZIP: [] Change [] Addition
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14. NAME: [] Change [] Addition
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16. CITY, STATE, ZIP: [] Change [] Addition
17. TITLE: [] Change [] Addition
18. NAME: [] Change [] Addition
19. STREET ADDRESS: [] Change [] Addition
20. CITY, STATE, ZIP: [] Change [] Addition
21. TITLE: [] Change [] Addition
22. NAME: [] Change [] Addition
23. STREET ADDRESS: [] Change [] Addition
24. CITY, STATE, ZIP: [] Change [] Addition

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 149.07(3)(a), 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 registered agent or have been previously so designated in a filing required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if change in or on an attachment with an address.

SIGNATURE: Andrew L Warren **ANDREW L WARREN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/96 (718) 863-8000

CR2E034 (12/95)