

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Nandra B. Merchant
Secretary of State
1995-1999

APPROVED
AND
FILED

95 MAY -1 AM 3:11

DOCUMENT # **P36932** (2)

NATIONAL ADMINISTRATIVE SERVICES, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Office Address: 100 SUMMIT AVENUE, MONTVALE NJ 07645
 Mailing Address: 100 SUMMIT AVENUE, MONTVALE NJ 07645

1. Date of Incorporation (2000)	2a. Mailing Address	3. Date of Incorporation (2000)	3a. Date of Last Report
21. Principal Office Address	26. Mailing Address	01/03/1992	03/23/1994
22. State of Incorporation	27. State of Incorporation	4. FIC Number	Applied For / Not Applicable
23. FIC Number	28. FIC Number	22-2882652	
24. FIC Number	29. FIC Number	5. Certificate of Status Desired	\$8.75 Additional Fee Required
30. FIC Number	30. FIC Number	6. Election Campaign Financing / Trust Fund Contribution	\$5.00 May Be Added to Fees
7. This corporation is liable for multiple taxation by FLORIDA Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
C T CORPORATION SYSTEM 8751 WEST BROWARD BLVD. PLANTATION FL 33324		81. Name		
		82. Street Address (P.O. Box Number, if Applicable)		
		83. City		
		84. State	FL	85. Zip Code

11. Pursuant to the provisions of Sections 607.02 and 607.1001, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent in both of 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 the business under Florida Statutes.

SIGNATURE: _____ (Signature of Registered Agent) _____ (Signature of New Registered Agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS	
12.1 NAME: PD MANNING, JAMES V. 12.2 STREET ADDRESS: 100 SUMMIT AVENUE 12.3 CITY: MONTVALE NJ	12.4 NAME: V FAILLA, FRANK J., JR. 12.5 STREET ADDRESS: 100 SUMMIT AVENUE 12.6 CITY: MONTVALE NJ	12.7 NAME: VSD MELE, CHARLES A. 12.8 STREET ADDRESS: 100 SUMMIT AVENUE 12.9 CITY: MONTVALE NJ	12.10 NAME: T MARRERO, VICTOR L. 12.11 STREET ADDRESS: 100 SUMMIT AVENUE 12.12 CITY: MONTVALE NJ
12.13 NAME: V DUFFY, JAMES 12.14 STREET ADDRESS: 100 SUMMIT AVENUE 12.15 CITY: MONTVALE NJ		12.16 NAME: PD DUFFY, JAMES B. 12.17 STREET ADDRESS: 100 Summit Avenue 12.18 CITY: MONTVALE, NJ 07645	12.19 NAME: T DORSA, CAROLINE 12.20 STREET ADDRESS: 100 Summit Avenue 12.21 CITY: MONTVALE, NJ 07645
		12.22 NAME: V FINDLING, MICHAEL 12.23 STREET ADDRESS: 100 Summit Avenue 12.24 CITY: MONTVALE, NJ 07645	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true, and equally, for the exemption stated in Sections 119.07 and 119.08, Florida Statutes, I further certify that the information included 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 certain officers or directors of this corporation have reviewed and approved this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Frank J. Failla, Jr.* Frank J. Failla, Jr. 04/20/95 (201)358-5400
 SECRETARY AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR