

FILE NOW: FILING FEE AFTER MAY 1 IS \$5500

FILED

Mar 19 1997 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P38463

(6)

1. Corporation Name
AUSTIN VERITY & SON, INC.



Principal Place of Business

3685 MERRICK RD.
SEAFORD NY 11783

Mailing Address

3685 MERRICK RD.
SEAFORD NY 11783-2810

2. Principal Place of Business

21 State Apt # etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 State Apt # etc.

27 City & State

28 Zip Country

29

3. Date Incorporated or Qualified
04/20/1992

3a. Date of Last Report
03/13/1996

4. FEI Number
11-1709013

Applied For
Not Applicable

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

9. Name and Address of Current Registered Agent

VERITY, AUSTIN W., JR.
300 INTRACOASTAL PLACE
APARTMENT 308
TEQUESTA FL 33469

10. Name and Address of New Registered Agent

1 Name

2 Street Address (P.O. Box Number is Not Acceptable)

3

4 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.009 and 607.0508, 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 607.0506, Florida Statutes.

SIGNATURE

[Signature] 2/27/97

12. OFFICERS AND DIRECTORS

12.1 TITLE DELETE

PD
MAFFUCCI, MICHAEL
132 IVY ST.
OYSTER BAY NY

12.2 TITLE DELETE

12.3 TITLE DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE Change Addition

13.2 TITLE Change Addition

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14. I do hereby certify that the information supplied with this filing does not qualify for exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information included in 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 trustee 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] 2/27/97

516-785-7600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (9/96)