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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995

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

DOCUMENT # P39148 (2)

1. Corporation Name

MANCHESTER EQUIPMENT CO., INC.

Principal Place of Business

50 MARCUS BLVD.
HAUPPAUGE NY 11788

Mailing Address

50 MARCUS BLVD.
HAUPPAUGE NY 11788

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 05/26/1992	3a. Date of Last Report 02/17/1994
4. FEI Number 11-2312854	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	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

KORB, LOU
902 CLINT MOORE RD.
STE. 144
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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: Louis Korb DATE: 3-7-95

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CDP	1.1 TITLE	☐ Change ☐ Addition
NAME	STEINBERG, BARRY	1.2 NAME	
STREET ADDRESS	50 MARCUS BLVD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	HAUPPAUGE NY 11788	1.4 CITY-ST-ZIP	
TITLE	SD	2.1 TITLE	☐ Change ☐ Addition
NAME	STEMPLE, JOEL	2.2 NAME	
STREET ADDRESS	50 MARCUS BLVD.	2.3 STREET ADDRESS	
CITY-ST-ZIP	HAUPPAUGE NY 11788	2.4 CITY-ST-ZIP	
TITLE	TD	3.1 TITLE	☐ Change ☐ Addition
NAME	BIVONA, MICHAEL	3.2 NAME	
STREET ADDRESS	50 MARCUS BLVD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	HAUPPAUGE NY 11788	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
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 110.07(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: Michael Bivona Treas MICHAEL BIVONA, TREAS. 3/7/95