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PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P93000028200 (2)

1. Corporation Name

VERO/FIDOREO LS, INC.



Principal Place of Business

Mailing Address

% FIRST FIDELITY BANCORPORATION  
550 BROAD ST B55015  
NEWARK NJ 07102

% FIRST FIDELITY BANCORPORATION  
550 BROAD ST B55015  
NEWARK NJ 07102

3. Date Incorporated or Qualified

04/15/1993

3a. Date of Last Report

04/05/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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 607.0502 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

Signature typed or printed name of registered agent (not for application)

(Not for Registered Agent signature required when filing this)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DS  
NAME JERRY, H A  
STREET ADDRESS 550 BROAD ST  
CITY-STATE-ZIP NEWARK NJ

☒ DELETE

TITLE DP  
NAME MURPHY, FRANCIS X  
STREET ADDRESS 550 BROAD ST  
CITY-STATE-ZIP NEWARK NJ

☐ DELETE

TITLE DV  
NAME SLATER, ROBERT L  
STREET ADDRESS 550 BROAD ST  
CITY-STATE-ZIP NEWARK NJ

☐ DELETE

TITLE S  
NAME BICKET, PATRICIA A  
STREET ADDRESS 550 BROAD STR  
CITY-STATE-ZIP NEWARK NJ

☐ DELETE

TITLE T  
NAME BLASS, PAUL J  
STREET ADDRESS 123 SO BROAD STR, PMBO 11  
CITY-STATE-ZIP PHILADELPHIA PA

☐ DELETE

TITLE T  
NAME BURRIESCI, ANTHONY R  
STREET ADDRESS 570 BROAD STR, A57007  
CITY-STATE-ZIP NEWARK NJ

☐ DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

☐ Change ☐ Addition

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:

Patricia A. Bicket

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/19/96

DATE

201-565-1694

DAYTIME PHONE #

CR2E034 (12/95)