

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000079001 (2)

1. Corporation Name

PUBLISHERS BUYING GROUP, INC.



Principal Place of Business

891 E OAK RD
P O BOX 429
VINELAND NJ 08360
US

Mailing Address

891 E OAK RD
P O BOX 429
VINELAND NJ 08360
US

3. Date Incorporated or Qualified
11/16/1993

3a. Date of Last Report
08/07/1995

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

9. Name and Address of Current Registered Agent

ELIAS, JOHN M
611 DRUID RD E
SUITE 512
CLEARWATER FL 34616

4. FEI Number
65-0434759

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

10. Name and Address of New Registered Agent

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 607.1506, 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 (if the same as the

Signature of Registered Agent typed or printed name (if not the same as the

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME FORCHIC, NANCY L
STREET ADDRESS 720 JERSEY AVE
CITY-ST-ZIP GLOUCESTER CITY NJ 08030

TITLE ☐ DELETE
NAME HALLISSEY, EILEEN A
STREET ADDRESS BOX 429
CITY-ST-ZIP VINELAND NJ 08360

TITLE ☐ DELETE
NAME HALLISSEY, WILLIAM J
STREET ADDRESS BOX 429
CITY-ST-ZIP VINELAND NJ 08360

TITLE ☐ DELETE
NAME FORCHIC, DENNIS G
STREET ADDRESS 720 JERSEY AVE
CITY-ST-ZIP GLOUCESTER CITY NJ 08030

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 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 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 registered or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-2-96

609-696-2500

CR2E034 (12/95)