

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000048614

1. Corporation Name

VOLT REALTY CORP.

Principal Place of Business

% Volt Information Sciences, Inc.
1221 AVE OF THE AMERICAS
47 FLOOR
NEW YORK NY 10020
US

Mailing Address

% Volt Information Sciences, Inc.
1221 AVE OF THE AMERICAS
47 FLOOR
NEW YORK NY 10020
US



3. Date Incorporated or Qualified

06/29/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

13-3849418

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 607.1508, 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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CDP ☐ DELETE
NAME SHAW, WILLIAM
STREET ADDRESS 237 FERNDAL ROAD
CITY-ST-ZIP SCARSDALE NY

TITLE V ☐ DELETE
NAME GROBERG, JAMES J.
STREET ADDRESS 1725 YORK AVE. APT 33B
CITY-ST-ZIP NEW YORK NY 10128

TITLE V ☐ DELETE
NAME ROBINS, IRWIN B.
STREET ADDRESS 177 E 77 ST
CITY-ST-ZIP NEW YORK NY

TITLE V ☐ DELETE
NAME SHAW, JEROME
STREET ADDRESS 7245 RUE DE ROARKE
CITY-ST-ZIP LA JOLLA CA

TITLE V ☐ DELETE
NAME EGAN, JACK
STREET ADDRESS 42 PENGILLY DRIVE
CITY-ST-ZIP NEW ROCHELLE NY

TITLE T ☐ DELETE
NAME GUARRINO, LUDWIG M.
STREET ADDRESS 12 VIEW ST.
CITY-ST-ZIP PLEASANTVILLE NY 10570

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

800001841908
-05/29/96--01019--029

***200.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JACK EGAN

4/29/96

(212)704-2400

Date

Daytime Phone #

5/1/96