

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90038 008 ***150.00

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1. Entity Name
VOLT REALTY CORP.



Principal Place of Business
**%VOLT INFORMATION SCIENCES, INC.
560 LEXINGTON AVENUE
NEW YORK, NY 10022**

Mailing Address
**%VOLT INFORMATION SCIENCES, INC.
560 LEXINGTON AVENUE
NEW YORK, NY 10022**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04022008 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
13-3849418

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME SHAW, STEVEN
STREET ADDRESS 560 LEXINGTON AVENUE
CITY-ST-ZIP NEW YORK, NY 10022

TITLE VPAT ☐ Delete
NAME FISCHBERG, DANIEL
STREET ADDRESS 560 LEXINGTON AVENUE
CITY-ST-ZIP NEW YORK, NY 10022

TITLE VSD ☐ Delete
NAME WEINREICH, HOWARD B
STREET ADDRESS 560 LEXINGTON AVENUE
CITY-ST-ZIP NEW YORK, NY 10022

TITLE V ☐ Delete
NAME SHAW, JEROME
STREET ADDRESS 7425 RUE DE ROARKE
CITY-ST-ZIP LAJOLLA, CA

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

TITLE VT ☐ Delete
NAME GUARINO, LUDWIG
STREET ADDRESS 12 VIEW ST.
CITY-ST-ZIP PLEASANTVILLE, NY

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DANIEL FISCHBERG

Date

4-8-08

Daytime Phone #

212-707-2400