Entricipel Pace of Disines         28.         Maring Appress         28.         Maring Appress         APPLIED FOR 2.2 - 33.4 90 / 91.         Maring Appress           Suite, Apr. R. etc.         Suite, Apr. R. etc.         Suite, Apr. R. etc.         S. Centricate of Status Desired         \$8.07.5 Addition           City & State         Status		L REPORT	FLORIDA DEPARTM Sandra B. M Scoretary o DIVISION OF COL	Mortham of State pRPORATIONS	-		
Interpol Place of Business         Mains Address           TIS MORRS AVE.         SPRINGPELD NJ 07091         38. Date of Lee Properties of Obj071989         38. Date of Lee Properties of Date of	Corporation Na	ame	• •				
Principal Place of Business         Za. Mailing Address         Za. Mailing Address <thza. address<="" mailing="" th="">         Za. Mailing Addres</thza.>	715 MORRIS	AVE.	715 MORRIS AVE.		3. Date Incorporated or Qualifie	ed   <b>3a.</b> Date of Last F	Report
Perincipal Parce of Business Provide Parce of Business Provide Parce of Business Provide Parce of Business Provide Parce Parc	Deret	v of Business	2a. Mailing Address		11/01/1994	05/01/	Applied For
Sulte, Apr. #, etc.			26 715 JVIORRI	26 715 WORRIS AVENUL		\$8.7	Not Applicable
City & State       City & State       State<	Suite, Apt. #,		Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee	e Required
Strain Control       Zab       Zab <thzab< th="">       Zab       Zab       Zab</thzab<>	City & State	12 12 Jan - 41 T	City & State	LO NJ	Trust Fund Contribution	Add Add	ded to Fees
0       7.0 % 1       [25]       [25]       [26]       10. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       81       Name         THE PRENTICE HALL CORPORATION SYSTEM, INC.       10. Name and Address of New Registered Agent       81       Name         SUITE 105       10. Name and Address of New Registered Agent       83       Street Address (P.O. Box Number is Not Acceptable)         63       50       50       63       52       Street Address (P.O. Box Number is Not Acceptable)         64       City       FL       85       20 Code         65       63       52       52       52       52         66       50       52	Zip	Country	Zip	Country	8. This corporation has liability Florida Statutes	y for intangible tax under : Yes 🔲 No	
IN Marke       THE PRENTICE HALL CORPORATION SYSTEM, INC.       120 1 HAYS ST.       SUITE 105       TALLAHASSEE FL 32301       63       Intel Total Corporation Statutes the above named corporation submits this statement for the purpose of changing its registered agent.       THE Private Statutes the above named corporation submits this statement for the purpose of changing its registered agent.       Intel Statutes the above named corporation's board of directors.       Corporation Statutes.       SIGNATURE       Expected agent.       Intel PD       Corricers and average to a nul average.       POTE Payment Agent agent at agent at agent at a nul average.       Intel       POTE Payment Agent agent at agent agent agent at agent agent agent at agent agen	010	9. Name and Address of Cur					
or registered agent, or both, fit me Status of Index 507.0605, Fonda Statutes.  SIGNATURE Bigentize, briefs resolutions of, Section 307.0605, Fonda Statutes.  SIGNATURE Bigentize, briefs resolutions of, Section 307.0605, Fonda Statutes.  Note Frequencies of spatial agent in 2 million agent in 2 mi	SUITE 105 TALLAHASSEE FL 32301 11. Pursuant to the provisions of Sections 607.06.02			84 Orty			
Supersonance       OFFICE RS AND DIFECTORS       13.       ADDITIONS/CHANGES TO OFFICE RS AND DIFECTORS IN T         INLE       PD       DELETE       1 1 ITLE       Change       A         NAME       EISENBERG, WARREN       12 NAME       Change       A         STREET ADDRESS       715 MORRIS AVE       13 STREET ADDRESS       Change       A         STREET ADDRESS       SPRINGFIELD NJ       14 COTY-ST-ZP       Change       A         MAKE       FEINSTEIN, LEONARD       22 NAVE       Change       A         STREET ADDRESS       110 BL COUNTY BLVD       23 STREET ADDRESS       Change       A         STREET ADDRESS       110 BL COUNTY BLVD       23 STREET ADDRESS       Change       A         STREET ADDRESS       T15 MORRIS AVE       33 STREET ADDRESS       Change       A         STREET ADDRESS       STREET ADDRESS       STREET ADDRESS	1. Pursuant to	the provisions of Sections 607.0	502 and 607,1508, Florida Statutes,	the above-named corpc	pration submits this statement for the	e purpose of changing it	ts registered offic red agent. I am
Inte PD DELETE 11111E 12NAME EISENBERG, WARREN 12NAME STREET ADDRESS 715 MORRIS AVE STREET ADDRESS 715 MORRIS AVE STREET ADDRESS 710 DELETE 2 1 TILE NAME FEINSTEIN, LEONARD 23 STREET ADDRESS STREET ADDRESS 110 BL COUNTY BLVD 23 STREET ADDRESS STREET ADDRESS 110 BL COUNTY BLVD 23 STREET ADDRESS STREET ADDRESS 715 MORRIS AVE 31 TILE TILE T THE T THE CURWIN, RONALD 31 STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CURVENT, RONALD 32 NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS CURVENT, RONALD 42 NAME TILE CURWIN, RONALD 33 STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CURVENT, STREET ADDRESS CURVENT, STREET ADDRESS STREET ADDRESS CURVENT, STREET ADDRESS CURVENT, STREET ADDRESS CURVENT, S	or registered familiar with	d agent, or boin, in the state of r , and accept the obligations of, S	Section 607.0505, Florida Statutes.		ed when reinstating)	DATE	
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64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 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)(9). Florida Statutes. I fi 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 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 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 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 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 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 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 signature signature shall have the same signature sha	or registered familiar with SIGNATURE: sit2. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	a agent, or boln, in the Statu of h , and accept the obligations of, s of the obligations of, s PD EISENBERG, WARREN 715 MORRIS AVE SPRINGFIELD NJ VSD FEINSTEIN, LEONARD 110 BI COUNTY BLVD FARMINGDALE NY T CURWIN, RONALD 715 MORRIS AVE	Section 307.0505, Florida Statutes.  agent and an ended an ended  SAND DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE  DELETE	Purgetericd Agent Expression exerts         13.         1 TITLE         1.2 NAME         1.3 STREET ADDRESS         1.4 CitY-ST-ZIP         2.1 TITLE         2.2 NAME         2.3 STREET ADDRESS         2.4 CitY-ST-ZIP         3.1 TITLE         3.2 NAME         3.3 STREET ADDRESS         3.4 CitY-ST-ZIP         4.1 TITLE         4.2 NAME         4.3 STREET ADDRESS         3.4 CitY-ST-ZIP         5.1 TITLE         5.2 NAME         5.3 STREET ADDRESS         4.4 CitY-ST-ZIP         5.1 TITLE         5.2 NAME         5.3 STREET ADDRESS         5.4 CitY-ST-ZIP         5.1 TITLE         5.2 NAME         5.3 STREET ADDRESS         5.4 CitY-ST-ZIP         6.1 TITLE         6.2 NAME	ed when reinstating)	DATE D OFFICERS AND DIREC Chang	CTORS IN 12 ge Addition nge Addition nge Addition nge Addition