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



CORP ANNUA	ORATION NL REPORT 996	Sandr Secr	PARTMENT OF STATE or B Mortham etary of State OF CORPORATIONS		
DOCUM 1. Corporation I	IENT # P 9500000	Inc.	Inc.)		
Principal Place (of Business 58 Lyons Place	Mailing Address		7	
Basking Ridge same New Jersey 07920				3. Date Incorporated or Qualified 02/02/95	3a. Date of Last Report N/A
2. Principal Pla	ce of Business	2a. Mailing Address		4. FEI Number 65-0555438	Applied For Not Applicable
Suite, Apt. #.	etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	Country	Zip	Country 30	8. This corporation has liability for Florida Statutes Yes	intangible tax under s. 199.032,
24]	9. Name and Address of Curre		30	10. Name and Address of New Re	egistered Agent
777 Miam	k G. Burt, Esq. Brickell Avenue i, Florida 3313 o the provisions of Sections 607.05 gistered agent, or both, in the State familiar with, and accept the obli	e, Suite 500 31	83 84 City	ddress (P.O. Box Number is Not Accepta corporation submits this statement for the pration's board of directors. I hereby acce	FL 85 Zip Code
SIGNATURE	sparare, typed or printed name of registered a	agent and title if applicable	(NOTE Registered Agent signature in	equired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE
12. TITLE NAME	D/P/S Paul S. Dopp	AND DIRECTORS DELETE	13. 1 1 TITLE 12 NAME	ADDITIONS/CHANGES TO UPP	Change Addition
STREET ADDRESS	58 Lyons Place Basking Ridge		1.3 STREET ADDRESS 1.4 CITY - ST - ZIP		
CITY ST-ZIF TITLE	D/VP/T	[] DELETE	2 1 TITLE		Change Addition
NAME STHEET ADDRESS	Christian E. I 58 Lyons Place		2 2 NAME 2 3 STREET ADORESS	•	
CHY-SI-ZIP	Basking Ridge	, NJ 07920	2.4 CITY - ST - ZIP 3.1 TITLE		Change Addition
TITLE NAME			32 NAME '		
STREET ADDRESS OF YEST-7IP			3 3 STREET ADDRESS 3 4 CITY - ST - ZIP		Change Addition
101f		☐ DELETE	4 1 TIFLE 42 NAME		Change Addition
NAME STREET ADDRESS			4.3 STREET ADDRESS		
CHY S1-206		DELETE	4 4 CH y - ST - ZIP 5 1 TITLE		Change Addition
. T.TLE NAME			5 2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CHTY ST-ZIP		DELETI	5 4 CITY - SI - ZIP 6 1 TITLE	40000174	48434 ange Addition
NAME		_	6.2 NAME	40000174 -03/19/96010	023032 > 3/4
STREET ADDRESS			6 3 STREET ADDRESS	***200.00	7
CITY-ST-ZIF			6.4 CHY-SI-ZIP	analify for the exemption stated in Section	on 119 07(3)(k) Florida Statutes I

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 1 turtier certify that the information included 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 office of director of the sorporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 of Block 6 if changed or of the attachment with an address.

SIGNATURE: _____

OFFICER OR DIRECTOR Paul S. Lopp

908-766-2488

CR2E034 (12/95)