Mailing Address 1111 CEDAR SWAMP RD

OLD BROOKVILLE NY 11545

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 826589

1. Corporation Name

Principal Place of Business

OLD BROOKVILLE NY 11545

1111 CEDAR SWAMP RD

BANFI PRODUCTS CORPORATION

9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 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 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, or a familiar with, and accept the obligations of, Section 607.0505, 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, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, of the purpose of changing its registered agent and two flagorites and the above-named corporation's board of directors. I hereby accept the appointment agent and two flagorites agent and two fl	•					08/06/1971			
Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc.	2. Principal Pl	ace of Business	2a. Mailing Address				Ar	plied For	
Suite, Apt. #, etc. 2 2 27 27 28 28 29 20 20 20 20 20 20 20 20 20 20 20 20 20	1		26			13-4941010	No	t Applicable	
City & State Country 2p Country 8. This corporation owes the current year intensible. Added to Fees The Personal Property Tax. You Say The State of New Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FI. 33324 82 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607 0502 and 507,1508, 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, Statutes, the above-named corporation board of directors. Inverse accept the equipation of Section 96, 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, Statutes, the above-named corporation board of directors. Inverse accept the exploitment as registered office or registered agent, or both, in the State of Florida, Statutes, the above-named corporation board of directors. Inverse accept the exploitment as registered office or registered agent. Advanced to directors. Inverse accept the exploitment as registered office or registered agent. Advanced to directors. Inverse accept the exploitment as registered office or registered agent. 11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statutes, the above-named corporation board of directors. Inverse accept the exploriment as registered of the corporation board of directors. Inverse accept the exploriment as registered of the corporation board of directors. Inverse accept the exploriment as registered of the corporation board of directors. Inverse accept the exploriment as registered of the corporation board of directors. Inverse accept the exploriment as registered accept the exploriment as registered of the corporation board of directors. Inverse accept the exploriment as reg	Suite, Apt.	#, etc.	⊢ ₁ ' ' '	_	-				
Addot to Fees Addition Additi	City & State	<u> </u>		 -	-	6 Election Campaign Financing	\$5.00	May Re	
Zip Country Zip Country Zip Country R. This corporation owes the current year intergible Personal Property Tax. Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Name 10. Name and Address of New Registered Name 10. Name and Address of New	¬ ′ ′	<u>-</u>	⊢ '			, , ,	• -	•	
28 29 30 Personal Property Tax.		Country		Countr	v	· 	naible		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 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 agent, or both, in the State of Florida, Such change was authorized by the corporation's ubmits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's ubmits this statement for the purpose of changing its registered agent of the provisions of Section 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of 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 authorized by the corporation's board of directors. I hereby accept the appointment as registered agent authorized by the corporation's board of directors. I hereby accept the appointment as registered agent authorized by the corporation's board of directors. I hereby accept the appointment as registered agent authorized by the corporation's board of directors. I hereby accept the appointment as registered agent authorized by the corporation is ubmits this statement for the purpose of changing its registered agent authorized by the corporation submits this statement for the purpose of changing its registered agent authorized by the corporation is ubmits this statement for the purpose of changing its registered agent authorized by the corporation is ubmits this statement for the purpose of changing its registered agent authorized by the corporation is ubmits this statement for the purpose of changing its registered agent authorized by the corporation is ubmits this statement for the purpose of changing its registered agent authorized by the corporation is ubmits this statement for the purpose of changing	24	<u>-</u> '	29	10		1 1 1		□No	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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 is 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, and familiar with, and accept the obligations of, Section 607,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 607,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 607,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 607,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I am familiar with, and accept the obligations of, Section 607,0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is registered agent. I am familiar with a purpose of changing is registered or corporation aboved of directors. I hereby accept the appointment as registered or corporation aboved of directors. I hereby accept the appointment as registered or corporation aboved of directors. I hereby accept the appointment as registered or corporation aboved of directors. I hereby accept the appointment as registered or corporation aboved of directors. I hereby accept the appointment as registered or corporation aboved or directors. I hereby accept the appointment as registered or corporation aboved or directors. I hereby accept the appointment as registered or corporation aboved or directors. I hereby acce						10. Name and Address of New Registered	gent		
Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable)					81 Name				
12. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. STREET ADDRESS IN 11. CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 OLD BROOK	CT CORPORATION SYSTEM				92 Chroat Address (D.O. Roy Number is Not Acceptable)				
11. Pursuant to the provisions of Sections 697 0502 and 697 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 697,0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and amount of registered agent agent and amount of registered agent and amount of registered agent agent and amount of registered agent agent and amount of registered agent agent agent agent and amount of registered agent agen				84	52 Street Address (P.O. Box Number is Not Acceptable)				
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 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, 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				83	3				
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 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, 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					ļ		T-10-		
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, a both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signature and many accept the objective of corporation's board of directors. I hereby accept the appointment as registered office or registered agent agent, and accept the objective of 607.550. Florida Solutions. SIGNATURE SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 WAVE NAPOLEON, JL 110. CEDAR SWAMP RD 13. TIPLE VANAE 111 CEDAR SWAMP RD 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition 111 CEDAR SWAMP RD 13. TIPLE VANAE 14. CEDAR SWAMP RD 13. TIPLE VANAE 14. CEDAR SWAMP RD 14. CEDAR SWAMP RD 15. TIPLE VANAE 16. CEDAR SWAMP RD 16. CEDAR SWAMP RD 17. STREET ADDRESS 111 CEDAR SWAMP RD 18. STREET ADDRESS 111 CEDAR SWAMP RD 19. CED				84	City	Fi	85 Zip	Code	
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, to an accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or privated name of registered agent and the if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition with the composition of th	44 Dumuent	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above	/e-named	• • • • • • • • • • • • • • • • • • •	hanging its	registered	
Signature, tyrind of printed raine of registation. (NOTE: Registered Agent agricults in required when introducing). DATE 12. OFFICERS AND DIRECTORS ITTLE VAPOLEON, JL 111 CEDAR SWAMP RD 111 CEDAR SWAMP	office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors, I nereby accept the appointment as registered								
Signature, tyrind of printed raine of registation. (NOTE: Registered Agent agricults in required when introducing). DATE 12. OFFICERS AND DIRECTORS ITTLE VAPOLEON, JL 111 CEDAR SWAMP RD 111 CEDAR SWAMP	SIGNATURE								
ITTLE				<u> </u>	ent signature r	340-00	DIRECTO	DC IN 12	
NAPOLEON, JL 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 MARIANI, HARRY STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 21 TITLE P						ADDITIONS/CHANGES TO OFFICERS AN			
STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE CEDAR SWAMP RD CHARLES CEDAR SWAMP RD CEDAR SWAMP RD		▼	☐ DEFEIE				X change		
DITUSTICE DITUS DITUS	NAME .	·				(6100 5 83			
DELETE 2.TITLE WARRIANI, HARRY 111 CEDAR SWAMP RD DIV. ST.ZIP OLD BROODVILLE, NY 00000 DELETE 2.TITLE 2.2NAME 2.3 STREET ADDRESS 111 CEDAR SWAMP RD DELETE 2.1TITLE 2.2NAME 2.3 STREET ADDRESS 1.1.1 CEDAR SWAMP RD DELETE 3.1 TITLE VAME GOETZ, THERESE 2.1 BANFI PLAZA 3.3 STREET ADDRESS 2.1 BANFI PLAZA 3.4 CITY. ST. ZIP OLD BROOKVILLE, NY 00000 DELETE 4.1 TITLE VARIANI, JOHN F JR 4.2 NAME MARIANI, JOHN F JR 4.3 STREET ADDRESS 1.1.1 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 4.1 TITLE VANAME SORRE, LUCIO DELETE 5.1 TITLE VANAME SORRE, LUCIO STREET ADDRESS 1.1.1 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 5.1 TITLE VANAME SORRE, LUCIO DELETE 5.1 STREET ADDRESS 1.1.1 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 5.1 TITLE VANAME SORRE, LUCIO DELETE 5.1 TITLE CALDERONE, PHILIP D DELETE 6.1 TITLE SOCHARLY ST. ZIP OLD BROOKVILLE, NY 00000 Addition AD	STREET ADDRESS	==		1.3 STREE	ET ADDRESS	1			
MARIANI, HARRY STREET ADDRESS TITLE WAME GOETZ, THERESE STREET ADDRESS 21 BANFI PLAZA STREET ADDRESS 22 BANFI PLAZA STREET ADDRESS CITY-ST-ZIP MARIANI, JOHN F JR STREET ADDRESS TITLE MARIANI, JOHN F JR STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS TITLE MARIANI, JOHN F JR STREET ADDRESS	CITY-ST-ZIP.	OLD BROOKVILLE, NY 00000			ST-ZIP	OLD BLOOKNILL NJ. 11747	TT1/01	F ^m Addison	
STREET ADDRESS TITLE V DELETE 3.1 TITLE QOETZ, THERESE STREET ADDRESS TOTY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME GOETZ, THERESE STREET ADDRESS TOTY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS TOTY-ST-ZIP DELETE 4.1 TITLE C DELETE AMAIANI, JOHN F JR STREET ADDRESS TOTY-ST-ZIP MARIANI, JOHN F JR STREET ADDRESS TOTY-ST-ZIP MARIANI, JOHN F JR STREET ADDRESS TOTY-ST-ZIP DELETE 4.1 TITLE V MARIANI, JOHN F JR STREET ADDRESS TOTY-ST-ZIP OLD BROOKVILLE, NY 00000 4.4 COTY-ST-ZIP OLD BROOKVILLE, NY 00000 ACCOTY-ST-ZIP OLD BROOKVILLE, NY 00000 TITLE V DELETE STREET ADDRESS TOTY-ST-ZIP OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS TOTY-ST-ZIP OLD BROOKVILLE NY OLD BROOKV	TITLE	P	☐ DELETE	2.1 TITLE			Change	☐ Addition	
OLD BROODVILLE, NY 00000 2.4 CITY-ST-ZIP OLD BROODVILLE, NY 00000 OCTO-ST-ZIP OLD BROODVILLE NY OCTO-ST-ZIP OCTO	NAME	Mariani, Harry		2.2 NAME			*		
TITLE V SORTZ, THERESE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARIANI, JOHN F JR STREET ADDRESS CITY-ST-ZIP OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS STREET A	STREET ADDRESS	111 CEDAR SWAMP RD		2.3 STREE	T ADDRESS	1111 CEDAR SWAMPRO	-		
TITLE V SORTZ, THERESE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MARIANI, JOHN F JR STREET ADDRESS CITY-ST-ZIP OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS STREET A	CITY-ST-ZIP	OLD BROODVILLE, NY 00000	- :	2. 4 CITY-	ST-ZIP	000 Brookville N.711343	-	·· <u> </u>	
STREET ADDRESS 21 BANFI PLAZA 33 STREET ADDRESS 34. CITY. ST. ZIP FARMINGDALE NY TITLE C NAME MARIANI, JOHN F JR 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD STREET ADDRESS 1111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 DELETE 6.1 TITLE STREET ADDRESS 1111 CEDAR SWAMP RD GENERAL CITY. ST. ZIP OLD BROOKVILLE, NY 00000 DELETE 6.2 NAME 6.3 STREET ADDRESS 1111 CEDAR SWAMP RD GENERAL CITY. ST. ZIP OLD BROOKVILLE NY OLD BROOKV	TITLE	V	☐ DELETE	3.1 TITLE			Change	☐ Addition	
STREET ADDRESS 21 BANFI PLAZA 33 STREET ADDRESS 34. CITY. ST. ZIP FARMINGDALE NY TITLE C NAME MARIANI, JOHN F JR 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 TITLE V NAME CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD STREET ADDRESS 1111 CEDAR SWAMP RD CITY. ST. ZIP OLD BROOKVILLE, NY 00000 DELETE 6.1 TITLE STREET ADDRESS 1111 CEDAR SWAMP RD GENERAL CITY. ST. ZIP OLD BROOKVILLE, NY 00000 DELETE 6.2 NAME 6.3 STREET ADDRESS 1111 CEDAR SWAMP RD GENERAL CITY. ST. ZIP OLD BROOKVILLE NY OLD BROOKV	NAME	GOETZ, THERESE 32N		3.2 NAME					
FARMINGDALE NY JA. CITY-ST-ZIP OLD Brockville NY. 11545 TITLE NAME MARIANI, JOHN F JR 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE Addition Addition Addition STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 62 NAME 63 STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE NY OLD BR	STREET ADDRESS			3.3 STREE	ET ADDRESS				
TITLE NAME MARIANI, JOHN F JR 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 MARIANE STREET ADDRESS OLD BROOKVILLE, NY 00000 DELETE 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE STREET ADDRESS OLD BROOKVILLE, NY 00000 DELETE 61 TITLE V CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 62 NAME 63 STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 OLD BROOKVILLE, NY 00000 DELETE 64 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY 00000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY				3.4. CITY-	ST-ZIP	OLD Brookville NY. 11545			
MARIANI, JOHN F JR 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 12 Addition OLD BROOKVILLE, NY 00000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY 00000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY 000000 OLD BROOKVILLE, NY 000000 OLD BROOKVILL	TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition	
STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 TITLE V NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 5.1 TITLE SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 DELETE 6.1 TITLE V NAME CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE NY O	NAME .	· · · · · · · · · · · · · · · · · · ·		4. 2 NAME	1		• •		
OLD BROOKVILLE, NY 00000 44 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 44 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 52 NAME 52 NAME 53 STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 TITLE V DELETE 61 TITLE V NAME CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE NY OLD BROOKV				4.3 STREE	T ADDRESS	1 .	_		
TITLE V GARE, LUCIO NAME SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 TITLE V GARE CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 GRANAME STREET ADDRESS 1111 CEDAR SWAMP RD GRANAME 6.2 NAME 6.3 STREET ADDRESS 1111 CEDAR SWAMP RD GRANAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP OLD BROOKVILLE, NY 0.0 BROOKVILLE, NY 0						OLD Brookville NY. 11545	-		
SORRE, LUCIO STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 TITLE V DELETE CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE NY 64 CITY-ST-ZIP OLD BROOKVILLE NY 64 CITY-ST-ZIP OLD BROOKVILLE NY	TITLE	V	☐ DELETE				(X) Change	☐ Addition	
STREET ADDRESS 111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 TITLE V CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE, NY 00000 GRANME 62 NAME 63 STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE NY OLD BROOKVILLE NY Addition 64 CITY-ST-ZIP OLD BROOKVILLE NY 64 CITY-ST-ZIP OLD BROOKVILLE NY 65 STREET ADDRESS 64 CITY-ST-ZIP OLD BROOKVILLE NY Addition	,	SORRE LUCIO		5.2 NAME			,		
CITY-ST-ZIP OLD BROOKVILLE, NY 00000 DELETE 5.4 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 DELETE 6.1 TITLE CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OLD BROOKVILLE NY 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 5.4 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP OLD BROOKVILLE, NY 00000 Addition		·		5.3 STREE	ET ADDRESS	1111 CEDAR SWAMPRY			
TITLE V DELETE 6.1 TITLE CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD CITY-ST-ZIP OLD BROOKVILLE NY 6.4 CITY-ST-ZIP COLD BROOKVILLE NY 6.4 CITY-ST-ZIP COLD BROOKVILLE NY 6.4 CITY-ST-ZIP COLD BROOKVILLE NY	· ·					OLD Brockvills N.Y. 11545	_		
CALDERONE, PHILIP D STREET ADDRESS 1111 CEDAR SWAMP RD OID BROOKVILLE NY 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CTY-ST-ZIP CALDERONE, PHILIP D 6.4 NAME 6.5 NAME 6.2 NAME 6.4 NAME 6.5 NAME 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CALDERONE, PHILIP D 6.5 NAME 6.5 NAME 6.5 NAME 6.7 NAME 6.7 NAME 6.8 NAME 6.8 NAME 6.8 NAME 6.9 NAME 6.1 NAME 6.1 NAME 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		V	☐ DELETE			1,10	Change	Addition	
STREET ADDRESS 1111 CEDAR SWAMP RD 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CO.D. BROOKVILLE NY 6.4 CITY-ST-ZIP CO.D. BROOKVILLE NY		CALDEDONE DUBIO D	<u> </u>	6.2 NAME			^ -		
CITY-ST-ZIP OID BROOKVILLE NY 64 CITY-ST-ZIP CO B CO & LUILLE LY 1545		I		6.3 STREE	ET ADDRESS				
CITY-ST-ZP ULD DRUUNVILLE NY A liber parties by the the information purplied with the filing does not qualify for the exemption stated in Section 119 07(3)(i) Florida Statutes I further perties that the information	!	1				or a good wille lite liter			
	CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for t			d in Section 119.07(3)(i). Florida Statutes. I further cert	ify that the	information	

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90127 032 ***150.00



DO NOT WRITE IN TI

3. Date Incorporated or Qualifed

,						
HIS SPACE	1					
Applied For	{					
Applied For Not Applicable						
\$8.75 Additional	ł					
Fee Required						
\$5.00 May Be	1					
Added to Fees						
Intangible	}					
Yes □No]					
ed Ágent	ļ					
	1					
85 Zip Code	1					
L						
of changing its registered pointment as registered						
,	Ì					
	l _					
AND DIRECTORS IN 12	ģ					
Change Addition	R2E034 (11/98)					
~	3					
	۶					
5	\$					
Change Addition	2					
	}					
	1					
Change Addition	}					
<i></i>	1					
45	1					
Change Addition						
.i <i>C</i>						
Change Addition	-					
A Cliarida P vodition						
	1					
40						
YS ☐ Addition						
YSChange ☐ Addition	-					

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 of the attachment with ap address, with all other like empowered.

SIGNATURE: