## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



I LORIDA DEPARTMENT OF STAT

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G25050

1. Corporation Name
F & H PRODUCTS, INC.

(7)

FILED Jan 31 1997 8:00am Secretary of State

Principal Place of E 222 EDEN RO POB 4146 STAMFORD CT 06907		Mailing Address 222 EDEN RD POB 4146 STAMFORD CT 06907-0146		3. Date Incorporated or Qualified		
				3. Date Incorporated or Qualified 02/22/1983	3a. Date of Last Report 03/20/1996	
2. Principal Place	of Business	2a. Mailing Address	1.16	4. FEI Number <b>06-1076331</b>	Applied For	
21 ONE	PASSAIC AVE		AIC AVE	00-10/6331	Not Applicable	
Suite, Apt. #, etc	2.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing	\$5.00 May Be	
	FIELD N.J.	28 FAIRFIELD		Trust Fund Contribution	Added to Fees	
Zip	Country	-7 Zip 1700Ch	Country	8. This corporation has liability for i	'T <b>PA</b> E	
24 07004	Name and Address of Current F	Registered Agent	o cues	Florida Statutes  10. Name and Address of New Re	Yes No	
	RGER, JOSEPH R.	-59-210-00 rigolit	81 Name	10. Hains and Address of New No	Broth of Liferia	
	EAN SHORE BLVD		100	Address (ISO Day No. 12 No. 12 No. 12		
ORMOND BEACH FL 32074			82 Street A	82 Street Address (P.O. Box Number is Not Acceptable)		
			83			
			84 City		85 Zip Code	
				corporation submits this statement for the p	FL	
agent. I am far SIGNATURE	ered agent, or both, in the State of miliar with, and accept the obligation between the obligation of registers. I agent a	ons of, Section 607.0505. Florid	ia Statutes.	oration's board of directors. Thereby acceptions to board of directors.	of the appointment as registered	
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE OV	<del>-</del>	DELETE	1.1 1/11/15	DPS	Change Addition	
	FENBERGER, JOSEPH		1.2 NAME			
	75 OCEAN MOND BCH, FL 00000		i 13 STREET ADDRESS			
Ulty-St-ZIP			1.4 CITY - ST - 7IP			
HA	Ller, matthew	DELETE	21 TITLE		Change Addition	
1922	EDEN RD		2 2 NAME			
STREET ADDRESS   ST	AMFORD CT		2 3 STREET ADDRESS			
CITY-ST-ZIP D		DELETE	2 4 CITY - ST - ZIP 3 1 TIT( F		Change Addition	
NAME BR	YDON, THOMAS E.	AT ALCTIC	3.2 NAME		end ensemble free continue	
CTRCET ANADERS   674	I INVERNESS CT		3.9 STREET ADDRESS			
CITY-ST-ZIP NE	w smyrna BCH FL		3.4. CITY - S1 - ZIP			
TITLE	<del></del>	DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY+ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 111LF		☐ Change ☐ Addition	
NAME			5.2 NAME		<u> </u>	
STREET ADDRESS			5.3 STREET ADDRESS		12 112	
CITY-ST-ZIP		Planta	5 4 CITY - ST - ZIP			
TATLE		☐ DELETE	6 1 1111 1 5	90000207	Change Addition	
NAME			6.2 NAME	<b>90000207</b> -02/05/97011	38007	
STREET ADDRESS			6.3 STREET ADDRESS	***165.00	en en menmen t	
* I do bereby se	with that the information musting a	auto this diline does not augite.	6.4 CITY - ST - ZIP	totad in Caption 110 07/2V/). Florido Statuto	- I for the second of the seco	

I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(f). Florida Statutes. Hurther 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 trusted appears in Block 12 or Block 12 if changed, or an antichpent without address.

**IGNATURE:** 

WOLDER IN THE OFFICER OF DIRECTOR

Dayting Phone #