

<b>SCC eFile</b>	<b>2012 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	212518394
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1.) CORPORATION NAME: <b>MORRIS INDUSTRIES, INC., A NEW JERSEY CORPORATION(USED IN VA BY: MORRIS INDUSTRIES, INC.)</b>  2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>CORPORATION SERVICE COMPANY Bank of America Center, 16th Floor 1111 East Main Street  RICHMOND, VA 23219</b>  3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>RICHMOND CITY</b>  4.) STATE OR COUNTRY OF INCORPORATION: <b>NJ</b>	DUE DATE: <b>6/30/2012</b>  SCC ID NO: <b>F0545717</b>  5.) STOCK INFORMATION <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">CLASS</th> <th style="text-align: left;">AUTHORIZED</th> </tr> </thead> <tbody> <tr> <td>COMA</td> <td>1,500</td> </tr> <tr> <td>COMB</td> <td>1,500</td> </tr> <tr> <td>PREFER</td> <td>2,000</td> </tr> </tbody> </table>	CLASS	AUTHORIZED	COMA	1,500	COMB	1,500	PREFER	2,000
CLASS	AUTHORIZED								
COMA	1,500								
COMB	1,500								
PREFER	2,000								

6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 777 ROUTE 23  CITY/ST/ZIP: POMPTON PLAINS, NJ 07444
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7.) DIRECTORS AND PRINCIPAL OFFICERS:	All directors and principal officers must be listed. An individual may be designated as both a director and an officer.
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NAME: ROBERT M NOCHENSON TITLE: PRESIDENT ADDRESS: 4 LUCY COURT CITY/ST/ZIP/CO: POMPTON PLAINS, NJ 07444	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: MICHAEL STERN TITLE: VICE PRESIDENT ADDRESS: 90 WASHINGTON CORNER ROAD CITY/ST/ZIP/CO: BERNARDSVILLE, NJ 07924	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: FRANK J MATULLO TITLE: SECRETARY ADDRESS: 11 WILDWOOD ROAD PO BOX 172 CITY/ST/ZIP/CO: STANHOPE, NJ 07874	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	
NAME: ALVIN NOCHENSON TITLE: CEO ADDRESS: 7112 MONTRICO DRIVE CITY/ST/ZIP/CO: BOCA RATON, FL 33433	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ FRANK J MATULLO SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	FRANK J MATULLO, SECRETARY PRINTED NAME AND CORPORATE TITLE	5/16/2012 DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.