


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

FILED

Feb 19 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **258574** (3)  
1. Corporation Name  
**G.I.B. INC.**

Principal Place of Business <b>C/O HARVEY HOROWITZ, ESQ SEPS&amp;S, 551 FIFTH AVE NEW YORK NY 10176 US</b>	Mailing Address <b>C/O HARVEY HOROWITZ, ESQ SEPS&amp;S, 551 FIFTH AVE NEW YORK NY 10176 US</b>
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3. Date Incorporated or Qualified <b>05/02/1962</b>	3a. Date of Last Report <b>01/30/1996</b>
4. FEI Number <b>34-6542314</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business <b>C/O Harvey Horowitz 239 East 79 St. New York NY 10021 USA</b>	2a. Mailing Address <b>C/O Harvey Horowitz 239 East 79 St. New York NY 10021 USA</b>
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9. Name and Address of Current Registered Agent <b>NATIONAL CORPORATE RESEARCH, LTD., INC. 1406 HAYS STREET, SUITE 2 TALLAHASSEE FL 32301</b>		10. Name and Address of New Registered Agent	
81. Name			
82. Street Address (P.O. Box Number is Not Acceptable)			
83.			
84. City	<b>FL</b>	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 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. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **HARVEY HOROWITZ President 1/28/97**  
Signature, typed name and title of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	<input type="checkbox"/> DELETE	1.1 TITLE <b>HARVEY HOROWITZ</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HOROWITZ, HARVEY E</b>		1.2 NAME	
STREET ADDRESS <b>C/O SEPS&amp;S, 551 FIFTH AVE</b>		1.3 STREET ADDRESS <b>239 East 79th Street</b>	
CITY - ST - ZIP <b>NEW YORK NY</b>		1.4 CITY - ST - ZIP <b>New York, NY 10021</b>	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 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, or on an attachment with an address.

SIGNATURE **HARVEY HOROWITZ 1/28/97 312-861-8061**

CR2E034 (9/96)