2-18-98 15-2223 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc

City & State

29-28 DITMARS BLVD

ASTORIA NY 11105

21

22

23 Zip

24

3

「# **453396**

(4)

Mailing Address

29-28 DITMARS BLVD

ASTORIA NY 11105

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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F & C REALTY, INC.

Secretary	of State

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FILED

Feb 18 1998 8:00am

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_	DO NOT WRITE	E IN THIS	SPACE			
3.	Date Incorporated or Qualified		_			
	05/21/1974					
4.	FEI Number			Applied For		
	59-1609859		<u> </u>	Not Applicable		
5,	Certificate of Status Desired			75 Additional e Required		
В.	Election Campaign Financing Trust Fund Contribution			00 May Be ded to Fees		
В,	3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
ñ	Name and Address of New Re	agistarec	Agent			

9. Name and Address of Current Registered Agent MORGENTALER, RICHARD, ATTY AT LAW 1550 NE MIAMI GARDNS DR #500 SKYLAKE BNK N. MIAMI BCH. FL 33179

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33			
34	City	[85]	Žip 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.

Country

Name

30

SIGNATURE	Signature typed or printed name of registered agent and title if applicable	. (NOTE: F	legistered Agent signature req	uired when reinstating) DATE		
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE		Change	Addition
NAME	CARONE, FRANK		1.2 NAME			
STREET ADDRESS	244 BOWERY ST		1.3 STREET ADDRESS	•		
CITY-ST-ZIP	NEW YORK NY		1.4 CITY - ST - ZIP			
TITLE	S	DELETE	2.1 TITLE		Change	Additio
NAME	Fertitta, ann a		2 2 NAME			
STREET ADDRESS	144-06 VILLIAGE RDL.		2.3 STREET ADDRESS			
CITY-ST-ZIP	FLUSHING NY		2. 4 CITY - ST - ZIP			
TITLE		DELETE	3.1 TITLE		Change	Additio
NAME			3.2 NAME		٢	
STREET ADDRESS			3.3 STREET ADDRESS		1	
CITY-ST-Z#P			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	Additio
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Additio
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY+ST-7IP			6.4 CiTY-S1-7IP			

14. Thereby 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 our pattachment with an address.

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