

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 12: 24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name CORPORATE FILING SERVICE, INC. 375 HUDSON STREET-11TH FLOOR NEWYORK, NEWYORK 10014	DOCUMENT # 840831
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Mailing Address 375 HUDSON STREET NEWYORK, NEWYORK 10014	Principal Place of Business C/O PRENTICE HALL CORP SYSTEM 375 HUDSON STREET NEWYORK, NEWYORK 10014
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DO NOT WRITE IN THIS SPACE

If above addresses are incorrect in any way, line through incorrect information and enter correction below		3. Date Incorporated or Qualified 6/12/1978	3a. Date of Last Report 5/01/1993
2. Mailing Address 21	2a. Principal Place of Business 26	4. FEI Number 14-1537954	Applied For Not Applicable
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>
23 City & State	28 City & State	7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/>	\$5.00 May Be Added to Fees
24 Zip	25 Country	29 Zip	30 Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

**PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE FL 32301**

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

11. Pursuant to the provisions of Sections 607 0502 and 607 1508 or Sections 617 0502 and 617.1508, 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 or 617 1503, Florida Statutes.

SIGNATURE _____ DATE _____
Registered Agent Accepting Appointment. NOTE: Registered Agent signature required when appointing.

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE		11 TITLE	
12 NAME		12 NAME	
13 STREET ADDRESS		13 STREET ADDRESS	
14 CITY - ST - ZIP		14 CITY - ST - ZIP	
21 TITLE		21 TITLE	
22 NAME		22 NAME	
23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY - ST - ZIP		24 CITY - ST - ZIP	
31 TITLE		31 TITLE	
32 NAME	****PLEASE SEE ATTACHED RIDER****	32 NAME	BR****
33 STREET ADDRESS		33 STREET ADDRESS	
34 CITY - ST - ZIP		34 CITY - ST - ZIP	
41 TITLE		41 TITLE	
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY - ST - ZIP		44 CITY - ST - ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY - ST - ZIP	***PLEASE SEE ATTACHED RIDER***	54 CITY - ST - ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(a) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **EILEEN ASH** *Eileen Ash* **4/25/95** **212-463-4674**
SIGNATURE AND TYPED OR PRINTED NAME OF BOILING OFFICER OR DIRECTOR Date Date Time

OFFICERS

PRESIDENT RICHARD KUSHAY

**VICE PRESIDENT
& SECRETARY EILEEN ASH**

**VICE PRESIDENT
& TREASURER ANITA CAMPANA**

**ASST. VICE PRES.
& ASST. SECRETARY JUDY VAN NAME**

**ASST. VICE PRES.
& ASST. TREASURER MARIA DOSCHER**

**ALL TO:
375 HUDSON STREET
NEW YORK, NEW YORK
10014**

DIRECTORS

RICHARD KUSHAY

EILEEN ASH

ANITA CAMPANA

REV. 3/15/95

THIS CORPORATION HAS NOT YET COMMENCED BUSINESS, AND UP TO THE PRESENT TIME ITS ONLY ASSETS CONSIST OF PREPAID EXPENSES IN THE AMOUNT OF \$ 1,000.00 AND ITS ONLY LIABILITIES ARE ISSUED CAPITAL STOCK OF EQUAL AMOUNT. ASIDE FROM THE CASH PAYMENT FOR ITS CAPITAL STOCK IT HAS ACQUIRED NO PROPERTY, IT HAS PAID NO WAGES, SALARIES, FEES, COMMISSIONS OR OTHER COMPENSATION TO ANY OFFICERS, DIRECTORS, EMPLOYEES OR OTHERS.