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 #

F9600002205 (0)

IBIS/REC INC.

Principal Place of Business

345 PARK AVENUE. 31ST FLOOR

Mailing Address

345 PARK AVENUE, 31ST FLOOR NEW YORK NY 10154

FILED Feb 18 1998 8:00am Secretary of State



NEW YORK NY 10154		NEW YORK NY 10154		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 05/02/1996		
2. Principal P	lace of Business	24 Mailing Address ack	stone	Group	4. FEI Number		Applied For
21 7 11		26 Mailing Address ackstone Group 26β45 Park Avenue		13-3889831		Not Applicable	
Suite, Apt	#, efc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional
22	11	27			5. Continuate of Claras Desired	Fee	Required
City & State	e	City & State	T F		6. Election Campaign Financing		00 May Be
23		New York, N.			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Coun	try	8. This corporation owes or has paid the cu		
24	25		30			Yes	L No
	9. Name and Address of Curre	nt Hegistered Agent		1 Name	10. Name and Address of New Registered	Agent	
	T CORPORATION SYSTEM			Name			
1200 SOUTH PINE ISLAND ROAD			9	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
PL.	ANTATION FL 33324		-	3			
			ľ	3			
	•		E	4 City		85 Z	ip Code
	¥			<u> </u>	<u> </u>	<u>. </u>	
11. Pursuant office or ragent La	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	02 and 607.1508, Florida Statute of Florida. Such change was a lations of, Section 607.0505, Flor	es, the abo uthorized rida Statu	ove-named co by the corpor les.	rporation submits this statement for the purpose o ation's board of directors. I hereby accept the app	r changini xointment	g its registered as registered
SIGNATURE			_				
	Signature, typed or printed name of registered ag			gent signature req	uired when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS ANI	Chang	
TITLE	P COUNTY OF COLUMN A		1.1 TITL				Je Adullion
NAME	SCHWARZMAN, STEPHEN A		1.2 NAM	_			
STREET ADDRESS	345 PARK AVENUE, 31ST FI	LUUR		ET ADDRESS			
CITY - ST - ZIP	NEW YORK NY 10154	DELETE		-ST-ZIP		Chang	e Addition
TITLE	VTD THOMAS I	☐ DELETE	2.1 TITL			L Chang	ge Adultion
NAME	SAYLAK, THOMAS J	000	2.2 NAM				
STREET ADDRESS	345 PARK AVENUE, 31ST FI	LOOR		ET ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10154	Delete		/-ST-ZIP		17 6	a la dessa
TITLE	V	☐ DELETE	3.1 TITL			☐ Chang	ge Addition
NAME	ORBUCH, STEVEN E	005	3.2 NAM				
STREET ADDRESS	345 PARK AVENUE, 31ST FI	LUUK		ET ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10154	Drutze		/-ST-ZIP		T Ch	no I Addition
TITLE	8	☐ DELETE	4.1 TITL			Chang	ge 🔲 Addition
NAME	WHITNEY, KENNETH C	000	4. 2 NAN				
STREET ADDRESS	345 PARK AVENUE, 31ST FI	LUUK		ET ADORESS			
CITY-ST-ZIP	NEW YORK NY 10154	DELETE	-	- ST- ZIP		Chang	ne Addition
TITLE	C PETERON PETER A	☐ DELETE	5.1 TiTL	ľ			je Lijaderion
NAME	PETERSON, PETER G	OOD	5.2 NAM	_	,	1/2	$\supset Z_i \supset Z_i$
STREET ADDRESS	345 PARK AVENUE, 31ST FI	LUUK		ET ADDRESS		#//C	Y 18
CITY-ST-ZIP	NEW YORK NY 10154	□ brutt		- ST - ZIP		Chang	ie Addition
TITLE	D	☐ DELETE	6.1 TITL		راستان کے راستان کے راستان بالیان بالیان کے لیے ہے۔		je Lj Addicion
NAME	GALLOGLY, MARK	000	6.2 NAM	1	8000024348 -02/19/98010130		
STREET ADDRESS	345 PARK AVENUE, 31ST FI	LOUK		ET ADDRESS		บช	
City-St-7iP	NEW YORK NY		■ 6.4 CITY	-S1-ZIP	***1⊑ក ក្រី		

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 direction 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.

CR2E034 (10/97)