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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000003659 (6)

CURZON DEVELOPMENT CORP.

FILED Mar 25 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					a sudicida quin inite labit ancie antic delli balli selle	ABIBA IIIIN AIIO BIII BIII IRDI
2 WISCONSIN CIRCLE #700 2 WISCONSIN CIRCLE # CHEVY CHASE MD 20815 CHEVY CHASE MD 2081					DO NOT WRITE IN TH	III CDAGE
					DO NOT WRITE IN TH 3. Date Incorporated or Qualified	IIS SPACE
					07/14/1997	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21 26		26			52-1629466	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional
22 27				5. Certificate of Status Desired	Fee Required	
 -		City & State			6. Election Campaign Financing	\$5.00 May Be
23	·····	28	· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation owes or has paid the	
24	9. Name and Address of Current	Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Register 10. Personal Property Tax due June 30.	Yes No
				81 Name		
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD						
PLANTATION FL 33324				82 Street Add	ress (P.O. Box Number is Not Acceptable)	
FU	MIANUN FL 33324		}	83		
				84 City	F	85 Zip Cod€
11. Pursuant I	to the provisions of Sections 607 0502	and 607 1508. Florida Statu	tes the at	love-named corr	poration submits this statement for the number	of changing its registered
office of re	egistered agent, or both, in the State c m familiar with, and accept the obligat	it Florida. Such change was	authorized	i by the corpora	tion's board of directors. I hereby accept the	appointment as registered
-	m lamiliar with, and accept the boligar	ions of, Section 607.0505, Fi	orida Stati	ites.		
SIGNATURE	Signature typed or printed name of rige tered agoni	and title dappis able (NO	IL Registered	Agent signature requi	red when reinstating) DATI	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P	☐ DELETE	1.1 Tit	LE		☐ Change ☐ Addition
NAME	PLOTNEK, HAROLD		1.2 NA	ME .		
STREET ADDRESS	2 WISCONSIN CIRCLE #700		1.3 ST	REET ADDRESS		
CITY-ST-ZIP	CHEVY CHASE MD 20815		1.4 CII	Y-ST-ZIP		
TITLE	VST	☐ DETELE	2.1 Tif	Lŧ	= -14-1-to	☐ Change ☐ Addition
NAME	KAUFMAN, JAY		2.2 NA	ME		
STREET ADDRESS	2 WISCONSIN CIRCLE #700		2.3 STI	REET ADDRESS		
CITY-ST-ZIP	CHEVY CHASE MD 20815		2. 4 CI	ry-St-ziP		i
TITLE	V	☐ DELETE	3.1 TiT	LE		☐ Change ☐ Addition
NAME	PLOTNEK, DAVID		3.2 NA	ME		
STREET ADDRESS	2 WISCONSIN CIRCLE #700		3.3 ST	REET ADDRESS		
CITY-ST-ZIP	CHEVY CHASE MD 20815			TY - ST - ZIP		
TITLE		DELETE	4.1 TIT	LE		☐ Change ☐ Addition
NAME			4.2 NA	ME		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				Y-ST-ZIP		
TITLE		☐ DELETE	5 1 TIT	i		Change Addition
NAME			5 2 NA			
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP		T 65,555		Y-ST-ZIP		
TITLE		☐ DELETE	61717	.ŧ		Change Addition
NAME			6.2 NAI	MΕ		
STREET ADDRESS			6.3 STF	EET ADDRESS		
CITY-ST-ZIP			64 CIT	Y - ST - 7/P		

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 roport 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 attaching with an address

2/20/98