


2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After August 21, 1996. If Dissolved, Minimum Amount Due To Reinstate: \$738.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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FILED
96 DEC 10 PM 1:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILING FEE	Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee + \$25.00 LATE FEE
\$ 263.75	Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company	DOCUMENT # M9500000352
John P. Curtin, Jr. L.L.C. 85 Broad Street New York, New York 10004	

1a. Principal Place of Business Address	85 Broad Street New York, New York 10004
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If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business		2a. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

3. Date Organized or Qualified	3a. State of Formation
8/23/95	Delaware
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
13-3847913	
5. Date of Last Report	6. Certificate of Status Desired
	<input type="checkbox"/> \$75 Additional Fee Required

7. Name and Address of Current Registered Agent
CT Corporation System 1200 South Pine Island Road Plantation, Florida 33324

8. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
500002054015--4
Suite, Apt. #, etc.
01/10/97--01067--003
***738.75 ***738.75
City
FL
Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE Connie Bryan Connie Bryan Special Asst. Sec. DATE 1-9-97
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
Managing Director	Frederic B. Garonzik	85 Broad Street	New York, NY 10004
Managing Director	Charles B. Mayer, Jr.	85 Broad Street	New York, NY 10004

REINSTATEMENT

Handwritten initials and date
1/9/97

11. 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)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: Frederic B. Garonzik Managing Director (212)902-1000
Frederic B. Garonzik Date _____ Daytime Phone # _____