

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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MAY -1 PM 2:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P09127** (2)
1. Corporation Name:
UCD CORPORATION

Principal Place of Business: **609 FIFTH AVENUE NEW YORK NY 10017**
Mailing Address: **609 FIFTH AVENUE NEW YORK NY 10017**

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or chartered: **02/17/1986**
3a. Date of last report: **05/01/1994**

2. Principal Place of Business: **21** 2b. Mailing Address: **26**
Suite Apt. # etc: Suite Apt. # etc: **22** **27**
City & State: City & State: **23** **28**
Zip: County: Zip: County: **24** **25** **29** **30**

4. FFI Number: **13-3021354** Applied For: Not Applicable:
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
7. The corporation has liability for intangible tax under § 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent:
**GALVIS, MIGUEL
% BANCO UNION - MIAMI AGENCY
1000 BRICKELL AVENUE, SUITE #1100
MIAMI FL 33131**

10. Name and Address of New Registered Agent:
81 Name:
82 Street Address (P.O. Box Number is Not Accepted):
83:
84 City: **FL** 85 Zip Code:

11. Pursuant to the provisions of Sections 607.01, and 607.02, Florida Statutes, the above named corporate entity, this statement for the purpose of changing its registered office to register its report of both in the State of Florida by 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 Sections 607.01, Florida Statutes.

SIGNATURE: *[Signature]*

12. OFFICERS AND DIRECTORS

OFFICER	PD BANZER, JOHN W. 56 STONEYWYCK DR. CHATHAM NJ V
OFFICER	NOWAKOWSKY, BOB 5 CHESTER ST ARDSLEY NY V
OFFICER	GROSHEN, MARC. W. 104 MACARTHUR DR. EDISON NJ TO
OFFICER	DEMARTINO, JOHN J 21 N CHATSWORTH AVE LARCHMONT NY
OFFICER	
OFFICER	
OFFICER	

13. ADDITIONAL OFFICERS, DIRECTORS, AND OTHER OFFICERS

OFFICER		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and true, and equally for the example as stated in Sections 199.01 and 199.02, Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that the corporation shall have the same legal effect as if made under oath. I am an officer or director of the corporation or the receiver or trustee appointed to receive the report as required by Chapter 607, Florida Statutes, and that my name appears on Block 12 or 13, if changed, or as an alternate with an address.

SIGNATURE: *[Signature]* **Marc Groshen** 4/25/95 212-337-8221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR