

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

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000056121 (4)
 1. Corporation Name
PERALTA LBK, INC.



Principal Place of Business 66 YORK STREET JERSEY CITY NJ 07302 US	Mailing Address 66 YORK STREET JERSEY CITY NJ 07302 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9882 LAJOLLA FARMS ROAD Suite, Apt. #, etc. 22 City & State 23 LA JOLLA, CA Zip 24 92037		2a. Mailing Address 26 50 SEYMOUR KATZ Suite, Apt. #, etc. 27 215 No. Woods Dr. City & State 28 ORANGE, NJ Zip 29 07079		3. Date Incorporated or Qualified 07/28/1994	
25 US		30 US		4. FEI Number 22-3315017	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

6. Name and Address of Current Registered Agent

**RIDLEY, FRED S
 201 N. FRANKLIN ST
 SUITE 2100
 TAMPA FL 33602**

10. Name and Address of New Registered Agent

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, 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, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	DE PERALTA, ARMANDO	
STREET ADDRESS	9882 LAJOLLA FARMS ROAD	
CITY-ST-ZIP	LAJOLLA CA	
TITLE	T	<input type="checkbox"/> DELETE
NAME	KATZ, SEYMOUR	
STREET ADDRESS	215 NO WOODS DRIVE	
CITY-ST-ZIP	S ORANGE NJ	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	VITTORIA JR., THEODORE V	
STREET ADDRESS	630 FIFTH AVE.	
CITY-ST-ZIP	NEW YORK NY 10111	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby 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 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 attachment with an address.

SIGNATURE: *Seymour Katz* **SEYMOUR KATZ** *4/1/98* **22-332-290**

CR2E034 (10/97)