FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

FILED
Mar 20 1996 8:00 am
Secretary of State

DOCUMENT # **P92000003718 (3)**

1. Corporation Name

THE ABB MERCHANDISING CO., INC.

Principal Place of Business

C/O CITRIN COOPERMAN & S. COMPANY
529 5TH AVE. 10TH FLOOR
NEW YORK NY 10017
US

Mailing Address

C/O COOPERMAN & CO.
529 5TH AVE. 10TH FLOOR
NEW YORK NY 10017
US

2. Principal Place of Business
21 c/o Citrin Cooperman & Co., LLP
Suite, Apt. #, etc.
22 529 Fifth Ave, 10th Floor
City & State
23 New York, NY
Zip 24 10017
Country 25 US

2a. Mailing Address
26 c/o Citrin Cooperman & Co., LLP
Suite, Apt. #, etc.
27
City & State
28
Zip 29
Country 30

3. Date Incorporated or Qualified: 11/12/1992

3a. Date of Last Report: 02/01/1995

4. FEI Number: 65-0413758 — 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

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

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	BETTS, RICHARD F	
STREET ADDRESS	210 FORREST LANE	
CITY-ST-ZIP	PARRISH FL	
TITLE	VP	☐ DELETE
NAME	ALLMAN, GREGORY L	
STREET ADDRESS	650 CALIFORNIA ST.	
CITY-ST-ZIP	SAN FRANCISCO CA	
TITLE	VP	☐ DELETE
NAME	JAIMOE	
STREET ADDRESS	7 PENT ROAD	
CITY-ST-ZIP	BLOOMFIELD CT	
TITLE	ST	☐ DELETE
NAME	TRUCKS, CLAUDE H	
STREET ADDRESS	164 COMMADORE DR	
CITY-ST-ZIP	JUPITER FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	Betts, Richard F.	☑ Change ☐ Addition
12 NAME	c/o Harrison & Alderman	
13 STREET ADDRESS	5125 Manatee Avenue west	
14 CITY-ST-ZIP	Bradenton Fl. 34209	
21 TITLE	Allman, Gregory L.	☑ Change ☐ Addition
22 NAME	c/o Hemming Morse	
23 STREET ADDRESS	650 California Street	
24 CITY-ST-ZIP	San Francisco, CA 94108	
31 TITLE	Jaimoe	☑ Change ☐ Addition
32 NAME	c/o Courtney, Fink & Forbes	
33 STREET ADDRESS	533 Cottage Grove Road	
34 CITY-ST-ZIP	Bloomfield, CT 06002	
41 TITLE	Trucks, Claude H.	☑ Change ☐ Addition
42 NAME	c/o Ken Gordon	
43 STREET ADDRESS	2400 PGA Blvd, suite #4	
44 CITY-ST-ZIP	Palm Beach Gardens, Fl. 33410	
51 TITLE		☐ Change ☐ Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		☐ Change ☐ Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

14. 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 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: [signature] — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date 3/11/96 — Daytime Phone #

CR2E034 (12/95)