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PROFIT CORPORATION ANNUAL REPORT

1997

F&S DISPOSITION, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P19565

(1)

FILED May 08 1997 8:00am Secretary of State



| Principal Place of Business Mailing Address 750 THRD AVE. 4TH FLOOR NEW YORK NY 10017 NEW YORK NY 10017-2760 | | | 0 | | 3. Date Incorporated or Qualified 3a. Date of Last Report 05/07/1988 | |
|--|---|--|-------------|---|--|---|
| 2 Principal | Prace of Business | 2a. Mailing Address | | | 4. FEI Number | _ |
| 2. Principai 21 | rineipal Place of Business 2a. Mailing Address 26 | | | | 31-1105074 | Applied For Not Applicable |
| Suite, Ap | t #, etc | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & Sta | ate | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zipi | Country | Zιp | Country | , | 8. This corporation has liability for | |
| 24 | 25 | 29 | 30 | | | Yes X No |
| | 9, Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New Re | egistered Agent |
| | ENTICE HALL CORPORATION SY | 19 EM INU. | 81 | Name | | |
| 1201 HAYS ST. SUITE 105 | | | 82 | 82 Street Address (P.O. Box Number is Not Accepta | | ble) |
| | LLAHASSEE FL 32301 | • | 83 | 83 | | |
| 174 | | | | | | |
| | | | 84 | City | | FL 85 Zip Code |
| SIGNATURE | Signature type of or printed name of registrated ag OFFICERS AN | en and title if applicable (NOT NOT DIRECTORS DELETE | 13. | | required when reinstating) ADDITIONS/CHANGES TO OFFICE D | DATE CERS AND DIRECTORS IN 12 Change Addition |
| nave Street adoress City St-Zip | PLAVOUKOS, SPENCER ONE DAG HAMMARSJOLD PL NEW YORK NY 10017 | - | 1.2 NAME | T ADDRESS | O'CONNOR, RICHARD D. 1271 Avenue of the Ame New York, N.Y. | J |
| TOLE | Tonorp Militi | DELETE | 21 TITLE | | | Change Addition |
| PAAPI | FORSTER, ALLAN | 1040 | 22 NAME | ļ | | |
| STREET ADORESS | 1271 AVENUE OF THE AMERICAS NEW YORK NY 10020 | | 23 STREE | T ADDRESS | | |
| CITY-ST-7P | SD NEW YORK NY 10020 | T Decree | 2 4 CiTY- | ST-ZIP | | |
| T-TLF | LUBRANO, VINCENT P | ☐ DELETE | 3.1 THYLE | | | Change Addition |
| NAME Oznana arandona | ONE DAG HAMMARS IOLD PLAZA | | 3.2 NAME | , .nonrec | | |
| STREET ADORESS CITY+ST+ZIP | NEW YORK NY 10017 | • | 3.4. CITY - | F ADDRESS | | |
| HILE | D | DELETE | 4.1 TITLE | O1-TIL | 77 F. L. J. | Change Addition |
| NAME | ROBBINS, KENNETH L | | 4. 2 NAME | | | – |
| STRUE ADORESS | ONE DAG HAMMARSJOLD PL | AZA | 4.3 STREE | r address | | |
| C(17 - ST - Z(P | NEW YORK NY 10017 | | 4.4 City~ | ST-ZIP | | |
| TITLE | V AMACON ADTHUD M | ☐ DELETE | 5.1 TITLE | | | Change Addition |
| NAME | MASON, ARTHUR M 750 THIRD AVE. | | 5.2 NAME | | | ٠, |
| STREET ADDRESS | NEW YORK NY | | | T ADDRESS | 1271 Avenue of the Amer | is Cat |
| CITY - ST - ZIP | METT TOTAL IT | Doniere | 5.4 CiTY - | ST-ZIP | New York, N.Y 10020 | Change Addition |
| TIBLE | l | ☐ DELETE | 6.1 TITLE | | | Change Addition |
| VAMI. | | | 6.2 NAME | | | |
| STREET ADDRESS | : | | 6.3 STREE | T ADDRESS | | |

14. Lide 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 suppliemental 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 Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CHATTURE NAME OF SIGNING OFFICER OF DIRECTOR TRANS

4/29/97

212-399-810