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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCU 1. Corporation PFIZER	MENT # F9600 RINC:	0003380 (0)			H 1111 H 1111 H 1111 H 1111 H 1111 H 1111 H
Principal Place of Business Mailing Address 235 E. 42ND ST. 235 E. 42ND ST.					I FORNTAR OKY YOKO DANK BANKI BANKI BONK BONK	<u> </u>
NEW YORK NY 10017 NEW YORK NY 10017						
					DO NOT WRITE IN TI	HIS SPACE
					3. Date Incorporated or Qualified	
			·		07/01/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt.	# atc	Suite, Apt. #, etc.	***		13-53 15 170	Not Applicable \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required	
City & Stat	le .	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees	
Zip			p Country		8. This corporation owes or has paid the	current year Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Register	red Agent
	T CORPORATION SYSTEM		Į*	Name		
1200 SOUTH PINE ISLAND ROAD			E	Street Add	dress (P.O. Box Number is Not Acceptable)	······································
PLANTATION FL 33324		83		19		
			ľ	"		
			8	City		85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607 1508. Florida Statu	ites the abo	we-named cor	<u>-</u>	
office or I	registered agent, or both, in the Stat im familiar with, and accept the oblig	e of Florida, Such change was	authorized	by the corpora	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
	iri iamiliar with, and accept the obij	gallons of, Section 607.0505, r	Honda Statu	IOS.		
SIGNATURE	Signature, typed or printed name of registered as	jent and trife if approable (NC	TF: Registered /	Agent signature requ	uired when reinstating) DAT	TE.
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE	VP	☐ DELETE	1.1 TITE	E		☐ Change ☐ Addition
NAME	BARETT, BRIAN W		1.2 NAM	IE		
STREET ADDRESS	235 E. 42ND 8T.		1.3 STRE	ET ADDRESS		
CITY-ST-ZiP	NEW YURK NY 10017			- ST - ZIP	······	
TITLE	A A	DELETE 2.17		1		Change Addition
NAME	BOWLER, M K		2.2 NAM			
STREET ADDRESS	235 E. 42ND 8T. NEW YORK NY 10017			ET ADDRESS		
CITY-ST-ZIP TITLE	SV TORN HT 10017	☐ DELETE	2. 4 D/TY	(-ST-ZIP		Change Addition
NAMÉ	CLEMENTE, C L	Dictere.	3.2 NAM			Change Addition
STREET ADDRESS	235 E. 42ND 8T.			ET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10017			r-SI-ZIP		
TITLE	VP	DELETE	4,1 TITLE			Change Addition
NAME	SHELDASZ, DAVID L.		4. 2 NAN	ne C	hedlarz, David L.	F ', '
STREET ADDRESS	235 E 42ND ST		4.3 STR	ET ADDRESS	near I barre	
CITY-ST-ZIP	NEW YORK NY		4.4 CITY			
TITLE	PV	DELETE	5.1 TITLE			Change Addition
NAME	FARLEY, DONALD F		52 NAM	E		
STREET ADDRESS	235 E. 42ND ST.		5.3 STRE	ET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10017		5.4 CITY	-ST-ZIP		
TITLE	٧	DELETE	6.1 1111			Change Addition
NAME	FORCIER, GEORGE A		6.2 NAM	E		
STREET ADDRESS	235 E. 42ND ST.		6.3 STRE	ET ADDRESS		

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 receivor 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.

CR2E034 (10/97)

FILED

Jan 29 1998 8:00am

Secretary of State