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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 839493

(4)

SBHU LIFE AGENCY, INC.

PLANTATION FL 33324

FILED May 14 1998 8:00am Secretary of State

Zip Code

Principal Place	o of Business	Mailing Addre	CC				
250 WEST ST % TAX DEPT. NEW YORK N	ī.	250 WEST ST. TAX DEPT. 9TH FLOOR NEW YORK NY 10013 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/07/1977		
2. Principal Place of Business 21		2a. Mailing Address			4. FEI Number Applied 13-2896238 Not Ap		
Suite, Apt. #, etc.		Suite. Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	9	City & State	c		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 	Ζ(p)	30 Co	untry	This corporation owes or has paid the cur Personal Property Tax due June 30.	rrent year Intangible Yes No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
	CORPORATION SYSTEM 00 \$. PINE ISLAND ROAD			81 Name 82 Street Addr	ess (P.O. Box Number is Not Acceptable)		

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 Statutes authorized by the corporation's board of directors. I heroby accept the appointment as registered agent, and accept the obligations of Section 607.0505. Florida Statutes

83 City

agent. Far	n fa miliar with, and accept the obligations o	f. Section 607.0505 , Fk	rida Statutes.	tions board of directors. Thereby accept the appointment as registered	
SIGNATURE	Signature Typed or project name of these tends agent and title	standerable (NOTe	: Registered Agent signature requi	red when reinst-tring) DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	DELETE	1.1 TOLE	Change Addition	
NAME	Marynowski, Stephen T		1.2 NAME		
STREET ADDRESS	388 GREENWICH ST.		1.3 STREET ADDRESS		
CITY-\$T-ZIP	NEW YORK NY 10013		1.4 CHTY-ST-ZIP		
TITLE	PD	DELETE	2 1 TITLE	Change Addition	
NAME	PANTALEO, LAURA		2.2 NAME		
STREET ADDRESS	388 GREEENWICH ST.		2 3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY		2 4 CITY-\$1-ZIP		
TITLE	T	DELETE	3.1 TITLE	Change Addition	
NAME	DAY, MICHAEL J.		3.2 NAME		
STREET ADDRESS	388 GREENWICH ST.		3.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10013		3.4. CITY+ST+ZIP		
TITLE	AT	☐ DELETE	4.1 TITLE	Change Addition	
NAME	Grohman, Lee		4. 2 NAME		
STREET ADDRESS	250 WEST ST.		4.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY		4.4 CITY - ST - ZIP		
TITLE	\$	☐ DELETE	5.1 TITLE	Change Addition	
NAME	SAKS, A. GEORGE		5.2 NAME		
STREET ADDRESS	388 GREENWICH ST.		5.3 STHEET ADDRESS		
CITY - ST - ZIP	NEW YORK NY 10013		5.4 CITY - ST - ZIP		
TITLE	V	DELETE	6.1 TITLE	Change Addition	
NAME	MARTIN, LYNNETTE		6.2 NAME		
STREET ADDRESS	388 GREENWICH ST.		6.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10013		6.4 CITY - ST - 71P		

14. Thereby certify that the information supplied with this hing 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 eath; that I am an officer or director of the corporation or the receiver or furstice empowered to execute this report is required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address.

SIGNATURE: New Grown

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