

AMENDED

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

FILED  
Jul 22 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 661178  
1. Corporation Name  
**MIKLOR EQUITIES, INC.**

Principal Place of Business Mailing Address  
745 Fifth Avenue #812 745 Fifth Avenue #812  
New York, NY 10151 New York, NY 10151

"AMEND"

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		03/13/1980	
Suite, Apt. #, etc		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1990010	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>	
23		28		\$8.75 Additional Fee Required	
Zip	Country	Zip	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
24	25	29	30	\$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
Hecht, Fred  
3591 Environ Blvd.  
Apt. A-507  
Lauderhill, FL 33319

10. Name and Address of New Registered Agent  
81 Name  
Valdes-Fauli Corporate Services, Inc.  
82 Street Address (P.O. Box Number is Not Acceptable)  
777 South Flagler Drive, Suite 500E  
83  
84 City  
West Palm Beach FL 85 Zip Code  
33401

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: *Kenneth S. Beall, Jr.* Kenneth S. Beall, Jr., Vice President  
Date: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> DELETE
NAME	Bloomberg, Betty J.	
STREET ADDRESS	360 E. 72nd Street	
CITY- ST- ZIP	New York, NY	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	Lubash, Lorna L.	
STREET ADDRESS	127 Erskine Road	
CITY- ST- ZIP	Stamford, CT	
TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	Hecht, Fred	
STREET ADDRESS	3591 Environ Bv #A-501	
CITY- ST- ZIP	Lauderhill, FL	
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

11 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Bloomberg, Betty J.	
13 STREET ADDRESS	360 E. 72nd Street	
14 CITY- ST- ZIP	New York, NY	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY- ST- ZIP		
31 TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME	Lionel Etra, Esq.	
33 STREET ADDRESS	825 Eighth Avenue	
34 CITY- ST- ZIP	New York, NY 10019-7416	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY- ST- ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY- ST- ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY- ST- ZIP		

*4/10/22*

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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: *Lionel Etra* Lionel Etra, Treasurer  
Date: \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E034 (10/97)