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Annual Report

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ANNUAL FILING FEES \$5.00 - PROFIT CORP. \$7.00 - NON-PROFIT CORP.		<h2 style="margin:0;">CORPORATION ANNUAL REPORT</h2>		JAN 16 1975 109389 *****5.00																													
REMIT THIS FORM & FILING FEE TO: SECRETARY OF STATE THE CAPITOL TALLAHASSEE, FLORIDA 32304		DUE JAN. 1 DELINQUENT - JULY 1 ① 100009 CHARTER NUMBER ② 07/15/1925 DATE INC. OR IF FOREIGN DATE QUALIFIED IN FLA. ③ 6 SEE ENVELOPE BACK ④ 13-6149495 FED EMPLOYER ID. NO. ⑤ 12 FISCAL CLOSE OF ACCOUNTING PERIOD (MO) ⑥ CHANGE TO:		VALIDATION AREA - DO NOT WRITE IN THIS SPACE ⑦ 1974 YEAR OF LAST REPORT FILED IN THIS OFFICE ⑧ 1975 YEAR(S) THIS REPORT COVERS JAN 14 8 53 AM 1975 SECRETARY OF STATE TALLAHASSEE, FLORIDA																													
⑨ UNITED STATES CORPORATION COMPANY EXACT NAME		DO NOT WRITE IN THIS SPACE PLEASE READ INSTRUCTIONS ON BACK																															
⑦ IF RESIDENT AGENT AND/OR ADDRESS IS DIFFERENT, WRITE THIS OFFICE AT THE ABOVE ADDRESS FOR PROPER FORMS. RESIDENT AGENT AND STREET ADDRESS MOORE, EDGAR M. 800 BARNETT BANK BLDG. TALLAHASSEE, FL 32302		NOTICE: IN THE FUTURE, ALL MAIL WILL BE ADDRESSED TO THE PHYSICAL STREET ADDRESS OF CORPORATION. TO COMPLY WITH THIS REQUIREMENT, PLEASE CHANGE THE MAILING ADDRESS TO REFLECT THE PHYSICAL STREET ADDRESS OF THE PRINCIPAL PLACE OF BUSINESS IF NOT ALREADY STATED. ⑧ 100009 UNITED STATES CORPORATION CO 100009 70 PINE ST NEW YORK N Y 10005 ⑧ CHANGE TO: 70 PINE STREET HQ P.O. BOX NEW YORK N.Y. 10005																															
STRIKE THROUGH INCORRECT ENTRY AND TYPE CORRECT INFORMATION IN SPACE PROVIDED IMMEDIATELY BELOW LINE																																	
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:35%;">9 OFFICERS/DIRECTORS NAMES</th> <th style="width:30%;">STREET ADDRESS</th> <th style="width:20%;">CITY / STATE</th> <th style="width:15%;">TITLE(S)</th> </tr> </thead> <tbody> <tr> <td>JACKMAN, DAVID H</td> <td>70 PINE STREET</td> <td>NEW YORK, NY</td> <td>PRESIDENT</td> </tr> <tr> <td>KIERNAN, GARVIN P</td> <td>SAME</td> <td>NEW YORK, NY</td> <td>V.P.</td> </tr> <tr> <td>MCCARTHY, THOMAS A</td> <td>SAME</td> <td>NEW YORK, NY</td> <td>SEC</td> </tr> <tr> <td>DE MARTINA, JOHN</td> <td>SAME</td> <td>NEW YORK, N.Y.</td> <td>TREAS</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						9 OFFICERS/DIRECTORS NAMES	STREET ADDRESS	CITY / STATE	TITLE(S)	JACKMAN, DAVID H	70 PINE STREET	NEW YORK, NY	PRESIDENT	KIERNAN, GARVIN P	SAME	NEW YORK, NY	V.P.	MCCARTHY, THOMAS A	SAME	NEW YORK, NY	SEC	DE MARTINA, JOHN	SAME	NEW YORK, N.Y.	TREAS								
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CAPITAL STOCK ⑩ 10,000 SHARES @ \$ 1.00		I DECLARE THAT ALL FLORIDA DOCUMENTARY STAMP TAXES APPLICABLE TO CORPORATE STOCK (OR CERTIFICATES OF INTEREST OR PARTICIPATION) TRANSACTIONS DURING THE PREVIOUS YEAR HAVE BEEN PAID AS REQUIRED BY CHAPTER 201, FLORIDA STATUTES. I FURTHER DECLARE THAT I AM AN AUTHORIZED PERSON TO SIGN THE REPORT FOR THE ENTITY AND THAT IT IS TRUE AND CORRECT. AUTHORIZED SIGNATURE: <i>[Signature]</i> TITLE: President TEL. NO. 212-935-935 DATE: 1/10/75																															
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