SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.

AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS 98 JUL 10 AM 10: 49 **DOCUMENT#** 490465 (2)**THEW YORKERS ANONYMOUS, INC.** Principal Place of Business Mailing Address 0/0 DAVID WEISS 1/41 CHICKELL AVENUE. SUITE 3405 C/O DAVID WEISS 1541 BRICKELL AVENUE. SUITE 3405 MAMI FL 93129 DO NOT WRITE IN THIS SPACE MIAMI FL 33129 3. Date Incorporated or Qualified 12/10/1975 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 59-1636240 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent WEISS, DAVID 1541 BRIOKELL AVENUE 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 3408 83 MH FL 129 City 85 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (2/98)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE PD DELETE 1.1 TITLE Change Addition WEISS, DAVID I. NAME 1.2 NAME 1 CICHOLO 25 5 6 5 1 1 CI 1 - ---07/14/98 -- 01101 -- 013 1541 BRICKELL AVENUE, SUITE 3405 STREET ADDRESS 1.3 STREET ADDRESS MIAM FL ****150.00 ****150.00 CITY-ST-ZIP 1.4 CITY ST-ZIP TITLE 2.1 TITLE DELETE Addition Change 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIF 2.4 CITY-ST-ZIP DELETE 3.1 TITLE TITLE ___ Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE TITLE __ DELETE ____ Addition __ Change VAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE 5.1 TITLE ___ DELETE __ Change ___ Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition 6.2 NAME

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. reșident

6.3 STREET ADDRESS

tasident

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CiTY-ST-ZIP

7/1/98

(305) 85477111