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

PROFIT CORPORATION **ANNUAL REPORT**

Principal Place of Business

\$30 7 AVENUE



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # 586365
JILLY-BEAMAR INDUSTRIES, INC.

(9)

Mailing Address

530 7 AVENUE

Secretary of State

FILED

Apr 24 1997 8:00am

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NEW YORK NY 10018		NEW YORK NY 10018-4878								
						3. Date Incorporated or Qualified 09/13/1978		e of Last F)2/1996		
2. Principal Pia	ace of Business	2a. Mailing Address				4. FEI Number	-1	\A	pplied For	
21		26				59-1900901			ot Applicable	
Suite, Apt. #	ł, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional	
22		27							equired	
City & State		City & State				6. Election Campaign Financing			May Be	
Zip	Country	7ip	Col	untry		Trust Fund Contribution	_=		to Fees	
24	25	⊢	30	Jiriti y		This corporation has liability for in Florida Statutes		ax under s No	199.032	
24	9. Name and Address of Curr	29 29 29 20 20 20 20 20 20 20 20 20 20 20 20 20	1301	Т		10. Name and Address of New Reg				
BLIN	DER, STEVEN C.			81	Name					
7770 WEST OAKLAND PARK BOULEVARD										
SUNRISE FL 33321				82	Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
				63						
•										
••				84	City		FL	85 Zip	Code	
11. Pursuant to	o the provisions of Sections 607.0	502 and 607 1508. Florida Stat	hites the a	hove	e-named of	progration submits this statement for the n		L I	ts registered	
office or re	gistered agent, or both, in the Stanfamiliar with, and accept the ob-	ate of Florida. Such change wat ligations of, Section 607,0505.	s authorize Florida Sta	d by	the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	t the appo	intment as	registered	
SIGNATURE		ganerio en accionación de la constantidad de la con								
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (N	OTI: Register	ed Age	ant signature rec	quired when reinstating)	DATE.			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	PD	☐ DELETE	1.1 T	OLF.				Change	Addition	
NAME	HARRISON, MARK		1.2 N	AME						
STREET ADDRESS	120 EAST 34TH STREET		1.3 S	TREET	ADDRESS					
CITY-ST-ZIP	NEW YORK NY		1.4 0	ITY-S	A - ZIP					
TITLE		☐ DELETE	211	ITLE			[Change	Addition	
NAME			22 N	IAME						
STREET ADDRESS			235	TREET	ADDRESS					
CITY-ST-ZIP		:		2 4 CITY-ST-ZIP						
TITLE		DELETE	DELETE 3.1 TO			1.		Change	Addition	
NAME			3.2 N	AMć						
STREET ADDRESS			3.3 8	TREET	ADDRESS					
CITY-ST-ZIP			3.4	OITY-S	S1-ZIP					
TITLE		☐ DELFTE	4.1 T	ITLE				Change	Addition	
NAME			4.2	NAME						
STREET ADDRESS			4.3 5	JREC1	ADDRESS					
CITY-ST-ZIP			4.4 0	ITY-S	IT-ZIP					
TITLE		☐ DELE1E	5.11					Change	Addition	
NAME			5.2 N	IAME						
STREET ADDRESS			5.3 9	TREFT	ADDRESS					
CITY-ST-ZIP				HTY-S						
TITLE				1 11TLE			T	Change	Addition	
NAME	4		6.21	IAME	}					
STREET ADDRESS	//				ADDRESS					
CITY-ST-ZIP	\mathcal{M}_{∞}	4.4		HY-S						
14 Ldo bereb	y certify that the information supp	led with this filing does not ou	alify for the	OXE	motion stat	ted in Section 119.07(3)(i), Florida Statutes	s. I further	certify that	the	
information I am an off appears in	i indicated on this annual report of ficer or director of the comporation i Block 12 or Block 13 if grant gal	/surplemental annual report in the receiver or trustee emplor on an allachment with an a	s true and owered to iddress.	accu exec	irate and th oute this rep	oat my signature shall have the same lega port as required by Chapter 607, Florida S	l effect as i tatutes; an	f made un d that my i	ider oath; thi name	