

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

FILED
Jan 30 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 822695 (3)
1. Corporation Name
JOSEPH E. SEAGRAM & SONS, INC.

Principal Place of Business
375 PARK AVENUE
NEW YORK NY 10152-0192

Mailing Address
800 THIRD AVENUE
NEW YORK NY 10022



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 04/23/1969	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 13-1285240	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	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 THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 HAYES STREET, STE. 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CHAR	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRONFMAN, EDGAR M.	1.2 NAME	
STREET ADDRESS	375 PARK AVENUE	1.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10152	1.4 CITY-ST-ZIP	
TITLE	PCEO	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRONFMAN, EDGAR JR.	2.2 NAME	
STREET ADDRESS	375 PARK AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10152	2.4 CITY-ST-ZIP	
TITLE	VC	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MATSCHULLAT, ROBERT W	3.2 NAME	
STREET ADDRESS	375 PARK AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY	3.4 CITY-ST-ZIP	
TITLE	EVP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERBITS, STEPHEN E.	4.2 NAME	
STREET ADDRESS	375 PARK AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10152	4.4 CITY-ST-ZIP	
TITLE	ES	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALADINO, DANIEL R	5.2 NAME	
STREET ADDRESS	375 PARK AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	NY NY	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIAMBUSSO, ANN M.	6.2 NAME	
STREET ADDRESS	800 THIRD AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	NEW YORK NY 10152	6.4 CITY-ST-ZIP	

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 _____ Asst. Secretary 1/21/98 212-572-7000

CR2E034 (10/97)