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

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT #** 

111

| 1. Corporatio  | A REILL  | Y, 11    | NC.                      |              |                    | (')                 |          |                 |                                   |  |   |             |                 |              |  |
|--|--|----------|--------------------------|--------------|--------------------|---------------------|----------|-----------------|-----------------------------------|--|---|-------------|-----------------|--------------|--|
| Principal Place of Business Mailing Address  |  |          |                          |              |                    |                     |          |                 |                                   |  |   | FAL SILVE U |                 |              |  |
| 26 BROADWAY 26 BROADWAY  |  |          |                          |              |                    |                     |          |                 |                                   |  |   |             |                 |              |  |
| 11TH FLOOR 11TH FLOOR  |  |          |                          |              |                    |                     |          |                 |                                   |  | DO NOT WINTE IN   | T) 110 01   |                 |              |  |
| NEW YORK NY 10004  |  |          |                          |              | NEW YORK NY 10004  |                     |          |                 |                                   |  | DO NOT WRITE IN THIS SPACE                                |             |                 |              |  |
| US   |  |          | US                       |              |                    |                     |          |                 | 3. Date Incorporated or Qualified |  |   |             |                 |              |  |
| 2. Principal Place of Business   |  |          |                          |              |                    | 2a. Mailing Address |          |                 |                                   |  | <b>02/10/1976</b><br><b>4.</b> FEI Number                 |             | 1 1             | plied For    |  |
| 21   | lace or posi                                     | 1033     |                          | <u> </u>     | 26                 |                     |          |                 |                                   |  | 13-2779884  |             |                 | t Applicable |  |
| Suite, Apt.  | #, etc   |          |                          |              | Suite, Apt #, etc. |                     |          |                 |                                   | $\dashv$                                   |   |             | \$8.75          |              |  |
| 22   |  |          |                          | 2            | 27                 |                     |          |                 |                                   |  | 5. Certificate of Status Desired                          |             | •               | equired      |  |
| City & Stat  | е  |          |                          | City & State |                    |                     |          |                 | 6. Election Campaign Financing    |  | \$5.00  | May Be      |                 |              |  |
| 23   |  |          |                          | 2            | 28                 |                     |          |                 |                                   |  | Trust Fund Contribution                                   | ]           | Added           | to Fees      |  |
| Zip  | <b>},</b> '                                      |          |                          |              | <b>⊢</b> ' ⊢       |                     |          | Country         |                                   | - 1  | <ol><li>6. This corporation owes or has paid to</li></ol> | _           |                 |              |  |
| 24   | 9. Name and Address of Current                   |          |                          |              | 29 30              |                     |          |                 |                                   |  | Personal Property Tax due June 30.                        |             |                 | J No         |  |
|  |  |          |                          | reni Heç     | gistere            | a Agent             |          | B1              | Name                              |  | 10. Name and Address of New Regist                        | ratan W     | gent            |              |  |
|  |  |          | N SYSTEM                 |              |                    |                     |          |                 |                                   |  |   |             |                 |              |  |
|  | UU S. PINE<br>ANTATION                           |          | AND ROAD                 |              |                    |                     |          | <b>B2</b>       | Street Ad                         | dres                                       | ss (P.O. Box Number is Not Acceptable)                    |             |                 |              |  |
| PL   |  |          | l <sub>i</sub>           | 83           |                    |                     |          |                 |                                   |  |   |             |                 |              |  |
|  |  |          |                          |              |                    |                     |          | _               |                                   |  |   |             | 1 - 1 -         |              |  |
|  |  |          |                          |              |                    |                     | ['       | B4              | City                              |  |   | FL          | <b>85</b> Zip ( | Code         |  |
| 11. Pursuant   | to the provis                                    | ions     | of Sections 607.0        | )502 and     | 607.1              | 508, Florida Statu  | ove      | e named co      | orpor                             | ration submits this statement for the purp | ose of o  | changing it | s registered    |              |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-office or registered agent, or both, in the State of Florida. Such change was authorized by tagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. |  |          |                          |              |                    |                     |          |                 |                                   |  | n's board of directors. I hereby accept th                | не арро     | intment as      | registered   |  |
| SIGNATURE  |  |          |                          |              |                    |                     |          |                 |                                   |  |   |             |                 |              |  |
|  | Signature, typic                                 | for pro  | ited namin of registerns |              |                    |                     |          | Ago             | ont signature rec                 | quired                                     | •   | DATE        | DIDEATAG        | 0.10.40      |  |
| 12.<br>TITLE   | AS   |          | OFFICERS                 | AND DIF      | (CTO               | DELETE              | 13.      |                 |                                   |  | ADDITIONS/CHANGES TO OFFICER                              |             | ☐ Change        | Addition     |  |
| NAME   |  | J M      | ADV                      |              |                    | - Decerte           | 1        |                 |                                   |  |   | ٠           | onungo          |              |  |
|  | NAME O'HERN, MARY STREET ADDRESS 13 WOODMERE AVE |          |                          |              |                    |                     |          |                 | 1.2 NAME<br>1.3 STREET ADDRESS    |  |   |             |                 |              |  |
| CITY-ST-ZIP  | RUMSC  |          |                          |              |                    |                     |          | 1.4 CITY-ST-ZIP |                                   |  |   |             |                 |              |  |
| TITLE  | P  |          | •                        |              |                    | DELETE              | 2 1 TITL |                 | .,                                |  |   |             | Change          | Addition     |  |
| NAME   | QUICK,   | PET      | TER .                    |              |                    | 22 N                |          |                 |                                   |  |   |             |                 |              |  |
| STREET ADDRESS   | *** ***  |          |                          |              |                    | 235                 |          |                 | 2 3 STREET ADDRESS                |  |   |             |                 |              |  |
| CITY-ST-ZIP  | MILL N   |          |                          |              |                    |                     | 2.4 CIT  | Y- S            | ST-ZIP                            |  |   |             |                 |              |  |
| TITLE  | VPD  |          | <u> </u>                 |              |                    | DELETE              | 3.1 TITL | E               |                                   |  |   | I           | Change          | ☐ Addition   |  |
| NAME   | QUICK,   |          |                          |              |                    |                     | 3.2 NAM  | Æ               |                                   |  |   |             |                 |              |  |
| STREET ADDRESS   | 3 MOR  |          | _                        |              |                    |                     | 3.3 STR  | EET             | ADDRESS                           |  |   |             |                 |              |  |
| CITY-ST-ZIP  | WARRE  | N N      | J                        |              |                    | 1 22                | 3.4. CIT | _               | ST-ZiP                            |  |   |             | 1000            | 10000        |  |
| TITLE  | VPD  | <b>.</b> | -02                      |              |                    | ☐ DELETE            | 41 1111  |                 |                                   |  |   | ι           | Change          | Addition     |  |
| NAME   | BOTT,  |          |                          |              |                    |                     | 4. 2 NA  |                 |                                   |  |   |             |                 |              |  |
| STREET ADDRESS   |  |          | RD TERRACE               |              |                    |                     |          |                 | ADDRESS                           |  |   |             |                 |              |  |
| CITY-S1-ZIP  | GARDE  | N U      | I F TVIT                 |              |                    | DELETE              | 4.4 CIT  |                 | iT-ZIP                            | <del></del>                                |   | г           | Change          | Addition     |  |
| TITLE  | VPD  |          | NC .                     |              |                    |                     | 5 1 TITL |                 |                                   |  |   |             | v.anije         | (۱۹۵۱۱۱۷۱ س  |  |
| NAME<br>CIRCLI LOODECC   |  |          | IE<br>GTON PLACE,        | ADT EE       | ,                  |                     | 5.2 NAM  |                 | ADDRESS                           |  |   |             |                 | ļ            |  |
| STREET ADORESS   | NY NY  | FI HIT   | AFT OF                   | •            |                    | 5.4 CITY-S          |          |                 |                                   |  |   |             | ļ               |              |  |
| CITY-ST-ZIP<br>TITLE   | 141 141  |          |                          |              |                    | DELETE              | 6.1 TITL |                 | 11-40                             |  |   | 7           | Change          | Addition     |  |
| NAME   |  |          |                          |              |                    |                     | 6.2 NAM  |                 | ŀ                                 |  |   | _           | 5               | _            |  |
| STREET ADDRESS   |  |          |                          |              |                    |                     |          |                 | ADDRESS                           |  |   |             |                 |              |  |
| STALL I PLANIESS   | l  |          |                          |              |                    |                     |          |                 | 7.70                              |  |   |             |                 |              |  |

14. Thereby 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 trusted 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:

4/13/98

(a1a)747-1a00

**FILED** 

May 06 1998 8:00am

Secretary of State