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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F77179

IRA J. SARASOHN CONSULTANTS, INC.

Principal Place of Business Mailing Address 4838 TALLOWOOD LANE 4838 TALLOWOOD LANE **BOCA RATON FL 33487 BOCA RATON FL 33487-1138** 3. Date Incorporated or Qualified 3a. Date of Last Report 08/06/1996 04/21/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2181026 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees $Z_{(0)}$ Country Country 8. This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SARASOHN, IRA J **4838 TALLOWOOD LANE** 82 Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33487** 83 84 City Zip Code 85 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signary or typical or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)DELETE THEE 1.1 TITLE Change Addition SARASOHN, IRA J NAME 1.2 NAME 4838 TALLOWOOD LANE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY - \$1 - 7IP 1.4 CITY - ST - ZIP DELETE TITLE 2.1 TITLE Change Addition DOTO, GERARD A NAME 2.2 NAME 128 PASSAIC AVENUE STREET ADDRESS 2.3 STREET ADDRESS FAIRFIELD NJ 07004 2. 4 CITY - ST - ZIP CHY-ST-ZIP DELETE THLE VCST 3.1 TITLE Change Addition GILLESPIE, THOMAS NAME 3.2 NAME 128 PASSAIC AVENUE STREET ADDRESS 3.3 STREET ADDRESS FAIRFIELD NJ CITY - \$1 - ZIP 3.4. CITY - ST-2IP DELETE TITLE 4 1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - 70° 4.4 CITY - ST - ZIP DELETE Change noitibhA TOTALE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY - S1 - ZIP 5.4 City-\$t-ZiP DELETE 101:F 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

HISAGASOND PD 24, 1917

14. I do hereby certify that the information supplied with this fring 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.

FILED Mar 03 1997 8:00am Secretary of State

