FILE NOW: FILING FEE AFTER MAY 1 IS \$5

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMEN OF STATE

Sandra B. Mo

Secretary of S DIVISION OF CORPORATIONS

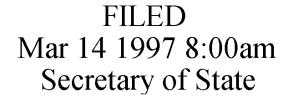
DOCUMENT # F92000000269 (2)

MEYERS-POLLOCK-ROBBINS, INC.

Principal Place of Business ONE WORLD TRADE CENTER

Mailing Address

ONE WORLD TRADE CENTER 91ST FLOOR





NEW YORK NY 10048 2. Principal Place of Business 21		NEW YORK NY 10048-1086					
					3. Date Incorporated or Qualified 10/30/1992	3a. Date of Last 11/01/199	
		28. Mailing Address 26			1 40 4007007		Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired		Additional Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution		0 May Be ed to Fees
Zip	Country 25	Zip 29	Coun 30	try	This corporation has liability for in Florida Statutes	intangible tax under Yes 🏻 No	rs. 199.032,
	9. Name and Address of Currer				10. Name and Address of New Re	gistered Agent	,
	PRENTICE-HALL CORPORATION	on system	1	Name			
	N. MAGNOLIA ST. LAHASSEE FL 32301		Ē	32 Street Add	lress (P.O. Box Number is Not Acceptab	ile)	·
			1	33			
			1	34 City		FL T	ip Code
11. Pursuant to office or re agent. Lar	o the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	2 and 607 1508, Florida Statu of Florida, Such change was ations of, Section 607.0505, Fl	tes, the abo authorized Iorida Statu	ove-named cor by the corpora tes.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing at the appointment	y its registered as registered
SIGNATURE	Signature, typed or printed name of regulated ago				ued when reinstating)	DA11:	
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	ORS IN 12
TITLE	С	☐ DELETE	1.1 101	f T	, V-1	Change	e 🔲 Additio
NAME	ECKER, DONALD A		1.2 NAM	16			
STREET ADDRESS	2200 N. CENTRAL RD.		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	FT. LEE NJ 07024		1,4 C/TY	'-ST-ZIP			
TITLE	Р	DELFTE	2.1 TIL	·-·		Change	e 🔲 Addilio
NAME	PLOSHNICK, MICHAEL		2.2 NAM	1E.			
STREET ADDRESS	17346 ST. JAMES CT.		2.3 STRI	EET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33498		2.4011	Y-\$1-ZIP			
ITLE		DELETE		E		Change	e 🔲 Additio
NAME			3.2 NAM	4			
STREET ADDRESS			3.3 STR	EFT ADDRESS			
CITY-ST-ZIP			3.4. Crī	Y-\$1.ZIP			
TITLE	DELLIE		4.1 THL	£		Change	e 🔲 Addilio
NAME			4. 2 NAI	VIE			
STREET ADDRESS			4.3 STR	EET ADORESS			
CITY-ST-ZIP			44 Cll Y	-ST-ZIP			
TITLE		☐ DELETE	5 1 TITE	E		Change	e
NAME			5.2 NAM	16			
STREET ADDRESS			5.3 STRI	EFT ADDRESS			
CITY-ST-ZIP			5.4 CHY	- \$1 - 7IP			<u>.</u>
TITLE		☐ DELETE	61 1IIL	[Change	e 🔲 Additio
NAME			6.2 NAM	në			
STREET ADDRESS			6.3 S1R	1 ADDRESS			
CITY-ST-ZIP			64 CIT	5T - 2IP			
	y certify that the information supplie	d with this filing does not qual			d in Section 119.07(3)(i), Florida Statules	s. I further certify th	at the

Information indicated on this annual report of studemental annual report is true and at am an officer or director of the corporation or the receiper priviletee empowered to eappears in Block 12 or Block 13 if changed or the discharged with an address. prate and that my signature shall have the same legal effect as if made under oath; that ute this report as required by Chapter 607, Florida Statutes; and that my name

3/7/97