

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

**FILED**  
**Mar 14 1997 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # F93000000471 (3)**

1. Corporation Name  
**LODEX BRICKELL, INC.**



Principal Place of Business <b>1180 AVENUE OF THE AMERICAS, 18TH FLOOR                  NEW YORK NY 10036</b>	Mailing Address <b>1180 AVENUE OF THE AMERICAS, 18TH FLOOR                  NEW YORK NY 10036-8401</b>
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>02/01/1993</b>	3a. Date of Last Report <b>07/24/1996</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>13-3696937</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent		
<b>THE PRENTICE-HALL CORPORATION SYSTEM, INC.</b> <b>1201 HAYES STREET</b> <b>STE 105</b> <b>TALLAHASSEE FL 32301</b>				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 607.0609 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and the applicable (NEE) Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<b>VS</b>
NAME	<b>TANSEY, FRANCIS X</b>	1.2 NAME	<b>BRIAN T. SUMMERS</b>
STREET ADDRESS	<b>50 GLENBROOK ROAD, #11-C</b>	1.3 STREET ADDRESS	<b>132 SPICER CREEK ROAD</b>
CITY-ST-ZIP	<b>STAMFORD CT 06902</b>	1.4 CITY-ST-ZIP	<b>PAK RIDGE VA 02656</b>
TITLE	<b>VTD</b>	2.1 TITLE	
NAME	<b>LUSKI, DAVID</b>	2.2 NAME	
STREET ADDRESS	<b>194 MOREHOUSE ROAD</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>EASTON CT 06812</b>	2.4 CITY-ST-ZIP	
TITLE	<b>VS</b>	3.1 TITLE	
NAME	<b>LAVIN, JAMES F</b>	3.2 NAME	
STREET ADDRESS	<b>483 WINTHROP ROAD</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>TEANECK NJ</b>	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: *[Signature]* **Brian T. Summers** *[Signature]* **2/12/97-3/16**

CR2E034 (9/96)