FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 PM 2:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F93000001258 (3)

1. Corporate Name

BARON FRANCOIS LIMITED CORPORATION

Principal Place of Business

330 W 58 STR
STE 305
NEW YORK NY 10019
US

Mailing Address

330 W 58 STR
STE 305
NEW YORK NY 10019
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/08/1993

3a. Date of Last Report: 04/04/1994

2. Principal Place of Business (21)

2a. Mailing Address (26)

Suite, Apt. #, etc. (22)

Suite, Apt. #, etc. (27)

City & State (23)

City & State (28)

Zip (24) County (25) Zip (29) County (30)

4. FEI Number: 13-3139060 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has authority to indemnify its officers and directors under the laws of the State of Florida: ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HOLLANDER, BRUCE L
762 MILITARY TRAIL
DEERFIELD BEACH FL 33442

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 Section 607.0501 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

(Signature of Registered Agent or Officer or Director of Registered Agent) — (Date)

12. OFFICERS AND DIRECTORS

TITLE	PST
NAME	BARON, ENMA
STREET ADDRESS	67 RIVERSIDE DRIVE, APT 3A
CITY, ST, ZIP	NEW YORK NY 10024-6135

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE	☐ Change ☐ Addition
2 NAME	
3 STREET ADDRESS	
4 CITY, ST, ZIP	
5 TITLE	☐ Change ☐ Addition
6 NAME	
7 STREET ADDRESS	
8 CITY, ST, ZIP	
9 TITLE	☐ Change ☐ Addition
10 NAME	
11 STREET ADDRESS	
12 CITY, ST, ZIP	
13 TITLE	☐ Change ☐ Addition
14 NAME	
15 STREET ADDRESS	
16 CITY, ST, ZIP	
17 TITLE	☐ Change ☐ Addition
18 NAME	
19 STREET ADDRESS	
20 CITY, ST, ZIP	
21 TITLE	☐ Change ☐ Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing, and accompanying documents, has been examined by me and is true and accurate to the best of my knowledge, information, and belief. I am familiar with and accept the duties and responsibilities of officer or director of a Florida corporation. I am aware that false information submitted to a governmental agency may be punishable under Section 817.155, Florida Statutes.

SIGNATURE: [signature] — 2/1/95 — 212 307-1944

SIGNATURE AND/OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Enma Baron, President

0300000 FP