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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9300001640 (2)

STEINMAN BOYNTON GRONQUIST & BIRDSALL INC.

**FILED** 

May 08 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address					ODIO: MOTO DICIT ONOT OBJETOD	
89 HUDSON STREET 100 W. WALNUT ST. HOBOKEN NJ 07030 RM T-1107 PASADENA CA 9112					DO NOT WRITE IN TH	IS SPACE
					<ol> <li>Date incorporated or Qualified 04/02/1993</li> </ol>	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			13-3383944	Not Applicable
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			Certificate of Status Desired	\$8.75 Additional
27     27					2. 3333.0 . 3133	Fee Required
23	ua.	City & State			6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip	Country Zip		Count		Trust Fund Contribution	Added to Fees
24	25	29	30		This corporation owes or has paid the operational Property Tax due June 30.	current year Intangible  XX Yes  No
	9. Name and Address of Cur		1301		10. Name and Address of New Registers	
C	T CORPORATION SYSTEM		8	Name		
1200 SOUTH PINE ISLAND ROAD			-	1 0	A44	
PLANTATION FL 33324			8:	Street	Address (P.O. Box Number is Not Acceptable)	
			8	3		
			L			
			84	City	F	85 Zip Code
Unice or	to the provisions of Sections 607.0 registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such change was	authorized t	ov the cor	d corporation submits this statement for the purpose poration's board of directors. I hereby accept the a	of changing its registered ppointment as registered
-	an ranged with, and accopt the ob	ingations of section 607.0000, FI	ionua Siatutt	38.		
SIGNATURE	Signature, typed or printed name of registered	G/A) eldabilique li esté brie frega	TE flegistered Ap	ent eignatur	e required when reinstating) DATE	
12.		AND DIRECTORS	13.	•	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	SRVD	DELETE	1.1 TITLE			Change Addition
NAME	BOWER, CURTIS A		1.2 NAME			
STREET ADDRESS	100 W WALNUT ST.		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	PASADENA CA		1.4 CITY -	ST - 7IP		
TITLE	PD DELETE		2.1 TITLE			Change Addition
NAME	SLUSZKA, P.		2.2 NAME			
STREET ADDRESS	110 WILLIAM ST.		23 STREE	T ADORESS		
CITY-ST-ZIP			2 4 CITY-ST-ZIP			
TITLE	COLE CIRCAN		3 1 TITLE			Change Addition
NAME	100 W WAI MIT CT		3 2 NAME			
STREET ADDRESS	DAGADENA CA		3.3 STREE	T ADDRESS		
CITY-ST-ZIP	PASADERA UA	T or ex	3.4. CITY	ST-ZIP		
TITLE	LOPUCH, JOHN J	☐ DELETE	4.1 TITLE			Change Addition
NAME	110 WILLIAM STREET		4. 2 NAME			
STREET ADDRESS	NEW YORK NY			T ADORESS		
CITY-ST-ZIP		DC) ETC	4.4 CITY -	ST-ZIP	1.00	0
TITLE	CETTEDALE DD		5.1 TITLE		VAS	Change Addition
NAME CIPCET ADDOCCO	400 W WAI NIT CT		5.2 NAME		100 W. WALMUT ST. PASOPENA, CA 91124	
STREET ADDRESS	DACADENA CA		_ B	T ADDRESS	100 W. WALMUT >1	
CITY-ST-ZIP TITLE	V	☐ DELETE	54 CITY	ST-ZIP	PHSOPENA, CA 91124	Change Ladder
NAME	AYOUB, NICHOLAS F	C OLLEGE	6 1 TITLE			☐ Change ☐ Addition
STREET ADDRESS	110 WILLIAM ST		62 NAME			
CITY-SI-7#P	NEW YORK NY		6.3 STREE	T ADDRESS		
L411701718						

14. I 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.

CIGNATURE.

AM

I CHALLERAN

4127100

626)44-2000