

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **F93000002448 (9)**

1. Corporation Name
PENAMI CORPORATION



Principal Place of Business
**C/O CONCURRENCY MANAGEMENT CORP
411 WEST PUTNAM AVE.
GREENWICH CT 06830**

Mailing Address
**C/O CONCURRENCY MANAGEMENT CORP
411 WEST PUTNAM AVE.
GREENWICH CT 06830**

3. Date Incorporated or Qualified
05/12/1993

3a. Date of Last Report
10/09/1995

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 13-2669943	Applied For Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301**

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 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1996	
TITLE	DV	1.1 TITLE	Assistant Secretary
NAME	HOLTZ, ROBERT	1.2 NAME	Arthur Amron
STREET ADDRESS	411 WEST PUTNAM AVE.	1.3 STREET ADDRESS	411 W. Putnam Ave.
CITY-ST-ZIP	GREENWICH CT 06830	1.4 CITY-ST-ZIP	Greenwich CT 06830
TITLE	P	2.1 TITLE	V
NAME	GOVEIA, FRANK	2.2 NAME	John Pollard
STREET ADDRESS	411 WEST PUTNAM AVE.	2.3 STREET ADDRESS	411 West Putnam
CITY-ST-ZIP	GREENWICH CT 06830	2.4 CITY-ST-ZIP	Greenwich CT 06830
TITLE	DV	3.1 TITLE	Assistant Secretary
NAME	PLAUMAN, MARK	3.2 NAME	Ging Sanson
STREET ADDRESS	411 WEST PUTNAM AVE.	3.3 STREET ADDRESS	411 West Putnam Ave.
CITY-ST-ZIP	GREENWICH CT 06830	3.4 CITY-ST-ZIP	Greenwich CT 06830
TITLE	V	4.1 TITLE	
NAME	KOHN, STEVE	4.2 NAME	
STREET ADDRESS	411 WEST PUTNAM AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	GREENWICH CT 06830	4.4 CITY-ST-ZIP	
TITLE	VST	5.1 TITLE	
NAME	MAYMUDES, JAY	5.2 NAME	
STREET ADDRESS	411 WEST PUTNAM AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	GREENWICH CT 06830	5.4 CITY-ST-ZIP	
TITLE	V	6.1 TITLE	
NAME	AMRON, ARTHUR	6.2 NAME	
STREET ADDRESS	411 WEST PUTNAM AVE.	6.3 STREET ADDRESS	
CITY-ST-ZIP	GREENWICH CT 06830	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) 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 AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jay Maymudes 3/1/96 (203) 862-7000

CR2E034 (12/95)