## 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 # F9.
1. Corporation Name
ALVAREZ & MARSAL, INC. F9400000015 (7)

**FILED** Feb 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Addres		Mailing Address	s		I CORDINO ILLA IBRIL BACA BACAL OFFE ORDER DALI	i <b>aa</b> ini <b>ab</b> ahi <b>aa</b> hat <b>kia</b>	G  \$140 1981
SUITE 1700 885 THIRD AVENUE NEW YORK NY 10022		SUITE 1700 885 THIRD AVENUE NEW YORK NY 10022		DO NOT WRITE IN THIS SPACE			
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Date Incorporated or Qualified     01/03/1994		
	ace of Business	2a. Mailing Address			4. FEI Number	Ar	oplied For
21 26		26			13-3207916		ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75		
27					Fee Re	···	
City & State City & State					6. Election Campaign Financing	\$5.00	
23 28 28 Zip Country Zip		28	Country		Trust Fund Contribution	Added 1	
24 Zip			<b>⊢</b> −η ΄		<ol><li>This corporation owes or has paid the Personal Property Tax due June 30.</li></ol>		langible ☐ No
24	9. Name and Address of Current		[30]		10. Name and Address of New Registe		
	RPORATION SERVICE COMPANY		81	Name			
1201 HAYS STREET TALLAHASSEE FL 32301				D: 111	(2.0.0		
			82	Street Addi	ress (P.O. Box Number is Not Acceptable)		·
			83				
				<b>5</b> ':		15-1 3-	<del></del>
			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							
<u> </u>	Signature typed or pointed name of registered experi		E Registered Age	nt signature requi	red when reinstating! DA ADDITIONS/CHANGES TO OFFICERS		29 IN 12
12.	OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
NAME	MARSAL, BRYAN P		1.2 NAME				
STREET ADDRESS	TA MENINAMENTAL DOAD		1.3 STREET ADDRESS				
CITY-ST-ZIP	RYE NY 11580		1.4 CITY - ST - ZIP				
TITLE	The state of the s		2.1 TITLE			Change	Addition
NAME	111110000 110001110		2.2 NAME				
STREET ADDRESS	AAA ALIFATILLE ATRICT		2.3 STREET	ADDRESS	15.		
CITY-ST-ZIP	ENGLEWOOD NJ 07631		2. 4 CITY - 9	ST-ZIP			
TITLE	☐ DELETE		3 1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3 3 STRFET	ADDRESS			
CITY+ST-ZIP			3.4. CITY - 9	ST - ZIP			
TITLE		☐ DELETE	4.1 YITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY+S	T-ZIP		- Dhann	1 4 4 4 5 5 -
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET				
CITY - \$1 - ZIP		Flatier	5.4 CITY-S	1 - ZIP		Change	Addition
TITLE		DELETE	6.1 TITLE		·	L. Change	
NAME			6.2 NAME				
STREET ADDRESS			63 STREET				
CITY-ST-ZIP			6.4 City-S	T-ZIP	0 . C. 440 07/0V0 F1-24- 04-14-14-14	ne portificable abo	information.

I horeby 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 open affactment with the address.

SIGNATURE:

1/19/98