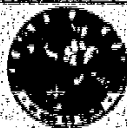


FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 18 PM 10:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F94000001719 (3)

1. Corporation Name

BEXEL CORPORATION

Principal Place of Business

801 S. MAIN ST.
BURBANK CA 91506

Mailing Address

801 S. MAIN ST.
BURBANK CA 91506

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/05/1994

3a. Date of Last Report

N/A

4. FEI Number

95-4448343

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**

7. This corporation has liability for intangible tax under S. 189.032,
Florida Statutes



Yes



No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS 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 resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BAGGOTT, MALCOLM A
STREET ADDRESS	COWDRAY HOUSE, 204 HIGH ST.
CITY - ST - ZIP	CHALFONT ST. PETER, BUCKS ENGLA-ND
TITLE	D
NAME	GREEN, RICHARD A
STREET ADDRESS	COWDRAY HOUSE, 204 HIGH ST.
CITY - ST - ZIP	CHALFONT ST. PETER, BUCKS ENGLA-ND
TITLE	D
NAME	MARTELL, MICHAEL L
STREET ADDRESS	521 FIFTH AVE., STE. 2200
CITY - ST - ZIP	NEW YORK NY 10175-0050
TITLE	P
NAME	TRUDEAU, DAVID G
STREET ADDRESS	801 S. MAIN ST.
CITY - ST - ZIP	BURBANK CA 91506
TITLE	V
NAME	MCPEEK, STEVE
STREET ADDRESS	801 S. MAIN ST.
CITY - ST - ZIP	BURBANK CA 91506
TITLE	V
NAME	NUDO, ROBERT A
STREET ADDRESS	801 S. MAIN ST.
CITY - ST - ZIP	BURBANK CA 91506

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 110.07(3)(b), 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

28 February 1995 8/8 841-5051