## 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 # F9400003218 (4)

1001 INVESTMENTS, INC.

WINOKER, LAURENCE

**625 MADISON AVENUE** 

**NEW YORK NY** 

NAME STREET ADDRESS

CITY-ST-ZIP

FILED Feb 16 1998 8:00am Secretary of State

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Principal Plac	ce of Business	Mailing Address				111 84168 11116 HEST (1851 1811 1651	
35 E. 62ND ST. 35 E. 62ND ST.							
ATT: TAX DI		ATT: TAX DEPT.			DO NOT WRITE IN T	DO NOT WRITE IN THIS SPACE	
NEW YORK I US	NT 10021	NEW YORK NY 10021 US	TORK NY 10021		3. Date Incorporated or Qualified		
00		00			06/20/1994		
9 Principal C	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
2. Principal Place of Business		⊢ ř				Applied For Not Applicable	
Suite, Apt.	# etc	<b>26</b>   Suite, Apt. #, etc.	····		13-3773906	CO 75 Addition	
22	w, 6tC.	h			5. Certificate of Status Desired September 5. September 5. September 5. Certificate of Status Desired September 5. Septemb	Fee Required	
City & State		City & State			6 Floring Constitution	<del></del>	
<del></del> _ `		28			6. Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	. <u> </u>	This corporation owes or has paid the		
24	25	29	30		Personal Property Tax due June 30.	Yes No	
24	9. Name and Address of Curre		130]		10. Name and Address of New Register		
714		··· · · · · · · · · · · · · · · · · ·	81	Namo			
THE PRENTICE-HALL CORPORATION SYSTEM, INC.			82		Street Address (P.O. Box Number is Not Acceptable)		
	110 NORTH MAGNOLIA STREET			Street Add			
18	LLAHASSEE FL 32301		83		<del></del>		
			55				
			84	City		85 Zip Code	
				L		FL   S   Zp code	
office or i	registered agent or both in the State	e of Horida. Such change was	authorized by	z the corpora	poration submits this statement for the purpo ation's board of directors. I hereby accept the	appointment as registered	
agent. I a	ım familiar with, and accept the oblig	gations of, Section 607.0505, F	lorida Statute	S	•		
SIGNATURE					, <u>.</u>		
	Signature, typed or printed name of registered as			ent signature requ	uired when reinstating) DA		
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	Change Addition	
TITLE	COBD	☐ DELETE	1.1 TITLE		Li change Li Au		
NAME	PERELMAN, RONALD O		1.2 NAME				
STREET ADDRESS	35 EAST 62ND STREET		1.3 STREET ADDRESS				
CITY-ST-ZIP	NEW YORK NY 10021	······	1.4 CITY-ST-ZIP				
TITLE	VO. DELETE		2.1 TITLE			Change Addition	
NAME	Drapkin, Donald G		2.2 NAME				
STREET ADDRESS	35 EAST 62ND STREET		2.3 STREFT	ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10021		2.4 CITY-	ST - ZIP			
TITLE	VCD	☐ DELETE 3			Change Addilio		
NAME	GITTIS, HOWARD		3.2 NAME				
STREET ADDRESS	35 EAST 62ND STREET		3.3 STREET	ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10021		3.4. CITY-				
TITLE	VCD	DELETE	4.1 TITLE			Change Addition	
NAME	SLOVIN, BRUCE		4.2 NAME			<b>v</b>	
STREET ADDRESS	35 EAST 62ND STREET		4 3 STREET	ADDDEES			
	NEW YORK NY 10021						
CITY-ST-ZIP	CFOV	☐ DELETE	4.4 CITY - S	51 - ZIP		Change Addition	
TITLE	•. • •	□ DELETE	5 1 111LE			C phange C Moulton	
NAME	ENGELMAN, IRWIN		52 NAME				
STREET ADDRESS	35 EAST 62ND STREET		5.3 STREET				
CITY-ST-ZIP	NEW YORK NY 10021		5.4 CITY-S	I-7P			
TITLE	VPC	☐ DELET <b>E</b>	6.1 TITLE			Change Addition	

6.3 STREET ADDRESS

14. Thereby 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.