

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

1995 MAY 26

500001503875
-06/01/95--01112--016
****225.00 ****225.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09-13-94
3a. Date of Last Report N/A

4. FEI Number 51-035-6423
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

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. 222 Lakeview Avenue
West Palm Beach, FL 33401

Suite, Apt. #, etc.

23. City & State

24. Zip

Country

2a. Mailing Address

26. 101 Park Avenue/
J.N. Ostrager

Suite, Apt. #, etc.

27. Suite 3500

28. City & State

29. New York, NY

Zip

10178

Country

9. Name and Address of Current Registered Agent

CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324

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 of officer or director of corporation or registered agent and title (if applicable)

Signature of Registered Agent (signature required when appointing)

(Date)

12. OFFICERS AND DIRECTORS

1. TITLE D
NAME S. Daniel Abraham
STREET ADDRESS c/o 919 Third Avenue - 26th Floor
CITY, ST, ZIP New York, NY 10022

2. TITLE D/P
NAME Dr. Edward L. Steinberg
STREET ADDRESS c/o 919 Third Avenue - 26th Floor
CITY, ST, ZIP New York, NY 10022

3. TITLE VP/T
NAME Carl Tsang
STREET ADDRESS 222 Lakeview Avenue
CITY, ST, ZIP West Palm Beach, FL 33401

4. TITLE S
NAME Brad Bleefeld
STREET ADDRESS 222 Lakeview Avenue
CITY, ST, ZIP West Palm Beach, FL 33401

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE Removed
NAME S. Daniel Abraham
STREET ADDRESS 222 Lakeview Avenue
CITY, ST, ZIP West Palm Beach, FL 33401

2. TITLE D/P
NAME Dr. Edward L. Steinberg
STREET ADDRESS 222 Lakeview Avenue
CITY, ST, ZIP West Palm Beach, FL 33401

3. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE
NAME
STREET ADDRESS
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)(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 name has been used for legal effect (as it may be under oath) that I am an officer or director of the corporation or the receiver or trustee empowered to execute the report as required by Chapter 607, Florida Statutes and that my name appears in Block 12 or Block 13 or changed or on an attachment with an address.

SIGNATURE:

Carl T. Tsang
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95
Date

(402) 820 1320
Telephone Number