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

4	MENT # F9400(DESIGNS, INC.)005685 (2)			
Principal Place of Business Mailing Address				I IODIIOO IIIO IBIII BIBII OOLII BEIII BDIII BEIII BBIII	#1 0 880 0 0 8801 10801 0881
35 EAST 62ND STREET ATT: TAX DEPT. NEW YORK NY 10021		35 EAST 62ND STREET ATT: TAX DEPT. NEW YORK NY 10021		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
9 Dringinal P	Place of Business	2a, Mailing Address		11/02/1994	The surface of Plane
21 Principal P	IdO# OF DUSINESS	26 Mailing Address		4. FEI Number	Applied for Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.		13-3790994	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zin	Country	28 7 ₁₀	O=	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the cur	_ ` _ `
24]	25 9. Name and Address of Current		30	Personal Property Tax due June 30. 10. Name and Address of New Registered A	Yes ∐ No Agent
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 81				IV. traine and realises of realise	78011
1201 MAYS STREET		82 Street Add	dress (P.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301					
	•		83		
			84 City	FL	85 Zip Code
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 protect induce of registered ignetion and titled applicable. (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS IN 12					
TITLE	CEOD	DELETE	13.	ADDITIONS OF MIGES TO OFFICE AND	Change Addition
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 - S1 - ZIP		
TITLE	VC	☐ DELETE	2.1 TITLE		Change Addition
NAME	GITTIS, HOWARD		2.2 NAME		
STREET ADDRESS	35 EAST 62ND STREET		2.3 STREE1 ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10021		2.4 CITY - ST - ZIP		
TITLE	P	☐ DELETE	3.1 TITLE		Change Addition
NAME	HALPERIN, RICHARD E		3.2 NAME		
STREET ADDRESS	35 EAST 62ND STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	NEW YORK NY 10021	DELETE	3.4. C(1Y-ST-ZIP 4.1 TiTLE		Change Addition
NAME	ENGELMAN, IRWIN		4. 2 NAME		Unargo La resultan
STREET ADDRESS	35 EAST 62ND STREET		4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10021		4.4 CITY-ST-7IP		
TITLE	V	DELETE	5.1 TITLE		Change Addition
NAME	SCHWARTZ, BARRY F		5.2 NAME		
STREET ADDRESS	35 EAST 62ND STREET		5.3 STREET ADDRESS		ĺ
CITY-ST-ZIP	NEW YORK NY 10021		5.4 CITY - ST - ZIP		
TITLE	VPS	DELETE	6.1 TITLE		Change Addition
NAME	DICKES, GLENN		6.2 NAME		
STREET ADDRESS	35 EAST 62ND STREET		6.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10021		6.4 City-St-ZiP		

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 13 if changed, or on an attachment with an address.

MARVIN SCHAFFER

FILED

Feb 16 1998 8:00am

Secretary of State