

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F95000001352 (2)

1. Corporation Name
ARGO REO CORP.

Principal Place of Business
100 MENLO PARK, FIFTH FLOOR
EDISON NJ 08837

Mailing Address
100 MENLO PARK, FIFTH FLOOR
EDISON NJ 08837-2428



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified
03/21/1995

3a. Date of Last Report
03/04/1996

4. FEI Number

13-3773669

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

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	C	DELETE
NAME	O'CONNOR, JEREMIAH W JR.	
STREET ADDRESS	399 PARK AVE., 25TH FL.	
CITY-ST-ZIP	NEW YORK NY 10022	
TITLE	VP	DELETE
NAME	ARTINGSTALL, KENNETH J	
STREET ADDRESS	399 PARK AVE., 25TH FL.	
CITY-ST-ZIP	NEW YORK NY	
TITLE	VS	DELETE
NAME	LEITAO, KEVIN D	
STREET ADDRESS	399 PARK AVE., 25TH FL.	
CITY-ST-ZIP	NEW YORK NY 1002	
TITLE	V	DELETE
NAME	AULIS, ERWIN K	
STREET ADDRESS	399 PARK AVE., 25TH FL.	
CITY-ST-ZIP	NEW YORK NY 1002	
TITLE	V	DELETE
NAME	LAMB, MARTIN	
STREET ADDRESS	399 PARK AVE., 25TH FL.	
CITY-ST-ZIP	NEW YORK NY 1002	
TITLE	V	DELETE
NAME	QUINN, THOMAS E	
STREET ADDRESS	100 MENLO PARK, 5TH FL.	
CITY-ST-ZIP	EDISON NJ 08837	

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	President
4.3 STREET ADDRESS	Aulis, Erwin K.
4.4 CITY-ST-ZIP	399 Park Ave., 25th Fl. New York, NY 10022
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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)