FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1997

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

FILED
Mar 10 1997 8:00am
Secretary of State

DOCUMENT # F95000003843 (8)

1. Corporation Name
LIEBER II CORP.

Principal Place of Business	Mailing Address
2500 WESTCHESTER AVE. PURCHASE NY 10577	TWO FIRST UNION CENTER 0200 CHARLOTTE NC 28288

3. Date Incorporated or Qualified: 08/09/1995
3a. Date of Last Report: 07/17/1996

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 Country 30

4. FEI Number: 56-1872375 ☐ 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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
FIRST FLORIDA BANK BLDG. STE 420
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 reinstating) DATE ______

CR2E034 (9/96)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PCEO	☐ DELETE	1.1 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	WAGONER, RICHARD K		1.2 NAME	RICHARD K WAGONER	
STREET ADDRESS	ONE FIRST UNION CENTER		1.3 STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288		1.4 CITY-ST-ZIP	CHARLOTTE, NC 28288	
TITLE	V	☐ DELETE	2.1 TITLE	DIRECTOR	☐ Change ☒ Addition
NAME	LEIGHTON, WARREN R		2.2 NAME	BARBARA J COLVIN	
STREET ADDRESS	TWO FIRST UNION CENTER		2.3 STREET ADDRESS	ONE FIRST UNION CENTER	
CITY-ST-ZIP	CHARLOTTE NC 28288		2.4 CITY-ST-ZIP	CHARLOTTE, NC 28288	
TITLE	T	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	HATCH, JAMES H		3.2 NAME		
STREET ADDRESS	TWO FIRST UNION CENTER		3.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC 28288		3.4 CITY-ST-ZIP		
TITLE	S	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	HATHAWAY, KENT S		4.2 NAME		
STREET ADDRESS	TWO FIRST UNION CENTER		4.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC 28288		4.4 CITY-ST-ZIP		
TITLE	S	☒ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HATHAWAY, KENT S		5.2 NAME		
STREET ADDRESS	301 S. COLLEGE ST.		5.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC 28288		5.4 CITY-ST-ZIP		
TITLE	T	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HATCH, JIM H		6.2 NAME		
STREET ADDRESS	301 S. COLLEGE ST.		6.3 STREET ADDRESS		
CITY-ST-ZIP	CHARLOTTE NC 28288		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] 2-21-97 (704) 383 9990

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #