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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 22 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9500003847 (9)

BLC CAPITAL CORP.

Mailing Address Principal Place of Business 919 THIRD AVE ATTH FL 919 THIRD AVE. 17TH FL NEW YORK OF 18022 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 08/09/1995 2a. Mailing Address 2. Principal Place of Business 4. FEI Number Applied For 645 Hadison Avenue LHS MADISON AVEAUR 13-3835694 Not Applicable ot #, etc. Floor \$8.75 Additional 5. Certificate of Status Desired Floor Fee Required 22 City & State State 6. Election Campaign Financing \$5.00 May Be N 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 10027 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** CORPORATION SERVICE COMPANY Name 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agest and ideal applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE □ DELLTE 1.1 TITLE **Z** Change Addition President TANNENHAUSER, ROBERT F NAME 1.2 NAME 919 THIRD AVE., 17TH FL. 1.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10022** CITY-ST-ZIP 1.4 CITY-ST-7IP DELETE TITLE 2.1 TITLE Secretary | Treasurer ☐ Addition NAPIER, JENNIFER NAME 2.2 NAME 919 THIRD AVE., 17TH FL. STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C(1Y - ST - Z(P CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAMÉ 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - 7IP DELETE ☐ Change Addition TITLE 61 THEE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I 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.