

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

FILED
May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F95000003855 (2)**

1. Corporation Name

TRIARC CORPORATE HEADQUARTERS, INC.

Principal Place of Business

Mailing Address

**280 PARK AVE
24TH FLOOR
NEW YORK NY 10017
US**

**280 PARK AVE
24TH FLOOR
NEW YORK NY 10017
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/08/1995

4. FEI Number

38-0471180

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 owes or has paid the current year intangible
Personal Property Tax due June 30 ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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	CD
NAME	PELTZ, NELSON
STREET ADDRESS	280 PARK AVE 41ST FLOOR
CITY-ST-ZIP	NEW YORK NY
TITLE	PD
NAME	MAY, PETER W
STREET ADDRESS	280 PARK AVE 41ST FLOOR
CITY-ST-ZIP	NEW YORK NY
TITLE	VCFO
NAME	BARNES, JACK L
STREET ADDRESS	280 PARK AVE 41ST FLOOR
CITY-ST-ZIP	NEW YORK NY
TITLE	V
NAME	SCHORR, BRIAN L
STREET ADDRESS	280 PARK AVE 41ST FLOOR
CITY-ST-ZIP	NEW YORK NY
TITLE	V
NAME	CROWE, ROBERT J
STREET ADDRESS	280 PARK AVE 24TH FLOOR
CITY-ST-ZIP	NEW YORK NY
TITLE	V
NAME	COHLAN, JOHN L
STREET ADDRESS	280 PARK AVE 41ST FLOOR
CITY-ST-ZIP	NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	V T
6.3 STREET ADDRESS	Thomas E. Shultz
6.4 CITY-ST-ZIP	280 Park Ave., 41st Floor
	New York, NY 10017

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.

SIGNATURE:

Robert J. Crowe
Robert J. Crowe, Asst. VP-Taxes

4/22/98

212-451-3115

CR2E034 (10/97)