

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

97 FEB 18 AM 8:39

DOCUMENT # F96000003211 (7)

1. Corporation Name
NEW HARBO CORP.



Principal Place of Business
% GOLDMAN, SACHS & CO.
100 CRESCENT CT., STE. 1000
DALLAS TX 75201

Mailing Address
% GOLDMAN, SACHS & CO.
100 CRESCENT CT., STE. 1000
DALLAS TX 75201-7883

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 600 E Las Colinas Blvd		06/25/1996		06/25/1996	
22 City & State		27 Suite 1900		4. FEI Number		Applied For	
23 Zip		28 Irving, TX		75-2657434		Not Applicable	
24 Country		29 75039		5. Certificate of Status Desired		8.75 Additional Fee Required	
		30		6. Election Campaign Financing		5.00 May Be Added to Fees	
				Trust Fund Contribution		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
						Yes No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE FL 32301				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	EDELMAN, MARTIN L	1.2 NAME	Gunn, G Douglas
STREET ADDRESS	100 CRESCENT CT., STE. 1000	1.3 STREET ADDRESS	100 Crescent Ct, Suite 1000
CITY-ST-ZIP	DALLAS TX 75201	1.4 CITY-ST-ZIP	Dallas, TX 75201
TITLE	D	2.1 TITLE	T, VP
NAME	KATZ, RICHARD	2.2 NAME	Frapart, Richard R
STREET ADDRESS	100 CRESCENT CT., STE. 1000	2.3 STREET ADDRESS	600 E Las Colinas Blvd, Suite 1900
CITY-ST-ZIP	DALLAS TX 75201	2.4 CITY-ST-ZIP	Irving, Tx 75039
TITLE	D	3.1 TITLE	S, VP
NAME	GLADSTEIN, GARY	3.2 NAME	Murphy, Ken
STREET ADDRESS	100 CRESCENT CT., STE. 1000	3.3 STREET ADDRESS	600 E Las Colinas Blvd, Suite 1900
CITY-ST-ZIP	DALLAS TX 75201	3.4 CITY-ST-ZIP	Irving, TX 75039
TITLE	D	4.1 TITLE	VP
NAME	HAMAMOTO, DAVID T	4.2 NAME	Ainsworth, Brian M
STREET ADDRESS	100 CRESCENT CT., STE. 1000	4.3 STREET ADDRESS	600 E Las Colinas Blvd, Suite 1900
CITY-ST-ZIP	DALLAS TX 75201	4.4 CITY-ST-ZIP	Irving, TX 75039
TITLE	D	5.1 TITLE	VP
NAME	ROTHENBERG, STUART M	5.2 NAME	Lozier, James
STREET ADDRESS	100 CRESCENT CT., STE. 1000	5.3 STREET ADDRESS	600 E Las Colinas Blvd, Suite 1900
CITY-ST-ZIP	DALLAS TX 75201	5.4 CITY-ST-ZIP	Irving, TX 75039
TITLE	D	6.1 TITLE	VP
NAME	WILLIAMS, TODD A	6.2 NAME	Bernstein, Ronald L
STREET ADDRESS	100 CRESCENT CT., STE. 1000	6.3 STREET ADDRESS	100 Crescent Ct, Suite 1000
CITY-ST-ZIP	DALLAS TX 75201	6.4 CITY-ST-ZIP	Dallas, TX 75201

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 199.07(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:

Richard R. Frapart
Richard R. Frapart, Vice President

2/7/97

972/831-2200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER, DATE, DAYTIME PHONE #