

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

FILED

**May 28 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # **F97000004053 (1)**

1. Corporation Name
IQI, INC.



Principal Place of Business: **71 WEST 23RD ST 8TH FLOOR NEW YORK NY 10010**

Mailing Address: **71 WEST 23RD ST 8TH FLOOR NEW YORK NY 10010**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	1645 N. Vine Street	26	1645 N. Vine Street	08/01/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22	Ste 700	27	Ste 700	13-2665686	
City & State		City & State		Applied For	
23	Los Angeles CA	28	Los Angeles CA	Not Applicable	
Zip	90028	Country	USA	5. Certificate of Status Desired	
24		29		<input type="checkbox"/> \$8.75 Additional Fee Required	
25		30		6. Election Campaign Financing Trust Fund Contribution	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS ST
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
85	Zip Code

11. Pursuant to the provisions of Sections 607.0202 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: *Louise J. Batista* DATE: **5/15/98**

12. OFFICERS AND DIRECTORS

TITLE	PCD	<input type="checkbox"/> DELETE
NAME	BLANK, EDWARD	
STREET ADDRESS	71 WEST 23RD ST 8TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10010	
TITLE	VC	<input type="checkbox"/> DELETE
NAME	CROSON, ERIC	
STREET ADDRESS	71 WEST 23RD ST 8TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10010	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GALLAGHER, SUSAN	
STREET ADDRESS	1455 PENNSYLVANIA AVE NW STE 350	
CITY-ST-ZIP	WASHINGTON DC 20004	
TITLE	TV	<input checked="" type="checkbox"/> DELETE
NAME	ROSS, ALAN M	
STREET ADDRESS	71 WEST 23RD ST 8TH FLOOR	
CITY-ST-ZIP	NEW YORK NY 10010	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Paul G. Stern	
1.3 STREET ADDRESS	1645 N. Vine St., Ste 700	
1.4 CITY-ST-ZIP	Los Angeles, CA 90028	
2.1 TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Stephen A. McNeely	
2.3 STREET ADDRESS	1645 North Vine St., Ste 700	
2.4 CITY-ST-ZIP	Los Angeles, CA 90028	
3.1 TITLE	VC	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Robin D. Richards	
3.3 STREET ADDRESS	1645 N. Vine Street, Ste 700	
3.4 CITY-ST-ZIP	Los Angeles, CA 90028	
4.1 TITLE	VC	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Edward Blank	
4.3 STREET ADDRESS	1645 North Vine St., Ste 700	
4.4 CITY-ST-ZIP	Los Angeles, CA 90028	
5.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Susan Gallagher	
5.3 STREET ADDRESS	1645 North Vine Str., Ste 700	
5.4 CITY-ST-ZIP	Los Angeles, CA 90028	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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.

SIGNATURE: *Louise J. Batista* DATE: **5/15/98**

CR2E034 (10/97)