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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1998

F9700004162 (0)

CALMCO, INC.

Principal Place of Business Mailing Address

301 CONGRESS AVE., STE. 200 AUSTIN TV 78701

FILED Feb 27 1998 8:00am Secretary of State



301 CONGRESS AVE., STE. 200 AUSTIN TX 78701 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/07/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 13-3860801 21 26 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Zip Country ZiD 8. This corporation owes or has paid the current year Intangible 24 29 Personal Property Tax due June 30. Yes 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 81 Name 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** City 84 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 little if applicable TE: Registered Agent signature requ ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE 1.1 TITLE Addition TITLE FRIEDMAN, DAVID M Beverly Cromwell 1.2 NAME NAME 301 congress, ste 200 301 CONGRESS AVE., STE. 200 1.3 STREET ADDRESS STREET ADDRESS Austin TX 78701 Tax Manager **AUSTIN TX 78701** 1.4 CITY-ST-ZIP CITY-ST-ZIP X Addition DELETE 2.1 TITLE Channe TITLE ervin, lee Mark A. Competiello NAME 2.2 NAME 301 CONGRESS AVE., STE. 200 277 Park Avenue STREET ADDRESS 2.3 STREET ADDRESS **AUSTIN TX 78701** New York, NY 10172 CITY-ST-ZIP 2.4 CITY-ST-ZIP Addition DELETE X Change TITLE 3.1 TITLE WHITE, MARJORIE S Marjorie S. White 3.2 NAME NAME 301 CONGRESS AVE., STE. 200 277 Park Avenue 3.3 STREET ADDRESS STREET ADDRESS **AUSTIN TX 78701** New York, NY 10172 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE X Change Addition 4 1 TITLE TITLE POWER, CLAIRE M 4. 2 NAME Claire M. Power NAME 301 CONGRESS AVE., STE. 200 277 Park Avenue 4.3 STREET ADDRESS STREET ADDRESS **AUSTIN TX 78701** New York, NY 10172 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELFTE Change Addition 5 1 TITLE TITLE MCPHERSON, O D 52 NAME NAME 301 CONGRESS AVE., STE. 200 5 3 STREET ADDRESS STREET ADDRESS **AUSTIN TX 78701** 54 CITY-S1-ZIP CITY-ST-ZIP Addition DELETE Change 6.1 TITLE TITLE TODD, OLIVIA A 6.2 NAME NAME 301 CONGRESS AVE., STE. 200 63 STREET ADDRESS STREET ADDRESS **AUSTIN TX 78701**

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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 suppliemental 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

SIGNATURE:

Mark A. Competiello Tax Manager

· 212-892-4939