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Apr 29, 1999 8:00 am
Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS							
DOCUMENT # F98000002054											
1. Corporation Name JOURNAL OF COMMERCE, INC.											
Principal Place of Business DORAL CORPORATE PLAZA 3750 NW 87TH AVE., STE. 450 MIAMI FL 33178			Mailing Address DORAL CORPORATE PLAZA 3750 NW 87TH AVE., STE. 450 MIAMI FL 33178								
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24 25			2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 30								
9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			10. Name and Address of New Registered Agent 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 D <input type="checkbox"/> DELETE NAME ALEXANDER, HELEN STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. CITY-ST-ZIP NEW YORK NY 10048 TITLE P <input type="checkbox"/> DELETE NAME MALIK, KIRAN STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. CITY-ST-ZIP NEW YORK NY 10048 TITLE V <input type="checkbox"/> DELETE NAME HANGER, DAVID STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. CITY-ST-ZIP NEW YORK NY 10048 TITLE SCFO <input type="checkbox"/> DELETE NAME HARABEDIAN, MARK STREET ADDRESS 2 WORLD TRADE CENTER, 27TH FL. CITY-ST-ZIP NEW YORK NY 10048 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 <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 type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/99

Date

212-837-7080

Daytime Phone #

CR2E034 (11/98)

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