5-15-98 B. 7489 -C. FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G36023 (1)

FILED

May 15 1998 8:00am

Secretary of State

CLIPPE	R CONSULTING CORPORAT	FION	• •							
Principal Place	e of Business	Mailing	Address	· · · · · · · · · · · · · · · · · · ·		1 1001111 0000 11611	OFFIIF OFFIED HARDE I	HA Bar ah Bar a	I WIERI BIBRI BAB	
1551 BOUTH OCEAN LANE STE. 173		P.O BO	P.O BOX 310 ROXBURY CT 06783-0310			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporate 04/27/1983	ed or Qualified			
2. Principal P	lace of Business	2a. Maili	ing Address	Tita		4. FEI Number	···-		[]A:	oplied For
21			Milinde	- Suara,""	34167	58-151775	2		<u> </u>	ot Applicable
Sulte, Apt. #, etc.			Suite, Apt #, etc. Suite 2420 27 One Rockeyetter Plazas			5. Certificate of Sta	itus Desired	这		Additional equired
City & State	e		City & State			6. Election Campai	gn Financing		\$5.00	May Be
23		28 ~ 4 , ~ 4				: Trust Fund Cont	ribution			to Fees
Zip	Country	Zip	૦૦ ૨૦	Country an usA		8. This corporation				- · I
24 🍎	25 9. Name and Address of Current	28		30 USA		Personal Propert				No
CT	CORPORATION SYSTEM	Hehistolen	Main	81 Name		IV. Maine and Add	ESS OI NEW N	eAlateten	Agent	
1200 S. PINE ISLAND ROAD, #250										
	NTATION FL 33324-4459			82 Street	Addres	s (P.O. Box Number	is Not Accepta	ble)		
	411711101112 00027 1100			83						·
				84 City				FL	85 Zip	Code
11. Pursuant to office or reacent. La	to the provisions of Sections 607.0502 ogistered agent, or both, in the State om in familiar with, and accept the obliga	and 607.150 of Horida, Su tions of, Sect	08, Florida Statute ich change was a tion 607.0505. Flo	es, the above-named outhorized by the corp orida Statutes.	corporation	ation submits this sta 's board of directors	tement for the I hereby acce	purpose o pt the app	changing it cointment as	ts registered registered
SIGNATURE										
	Signature, typed or printed name of registered agen			Registered Agent signature	e required (IOTÓ TO OFF	DATE	D DIDEOTOE	
TITLE	OFFICERS AND	DIRECTOR	S DELETE	13. 1.1 TITLE	1 3	ADDITIONS/CHAP	NGES TO OFFI	CERS ANI	Change	Addition
NAME	GOODRICH, JOHN K			1.2 NAME	100	rictor			L Grange	7
STREET ADDRESS	ONE ROCKYELLER PLAZA, SU	IITE 2420		1.3 STREET ADDRESS		1 3 4 mmit				
CITY-ST-ZIP	NEW YORK NY			1.4 CITY-ST-ZIP	76	or or x y i the	MAK.	8050		
TITLE	D		DELETE	2.1 TITLE	<u>~</u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 3		Change	Addition
NAME	GRADY, HENRY W		_	2.2 NAME						
STREET ADDRESS	ONE ROCKYELLER PLAZA, SU	IITE 2420		2 3 STREET ADDRESS						
CITY-ST-ZIP	NEW YORK NY			2 4 CITY-ST-ZIP						
TITLE	D .		☐ DELETE	31 THILE			····		Change	Addition
NAME	CHATZINOFF, ELI G			3.2 NAME						ļ
STREET ADDRESS	420 LEXINGTON AVE., SUITE	335		3.3 STREET ADDRESS						
CITY-SY-ZIP	NEW YORK NY			3.4. CITY - ST - ZIP						
TITLE	S KANE IOANNE		☐ DELETE	4.1 TITLE					L_ Change	Addition
NAME	CANE DOCKVELLED DLAZA CU	HTT 0400		4. 2 NAME						
STREET ADDRESS	ONE ROCKYELLER PLAZA, SU NEW YORK NY	1112 2420	(4.3 STREET ADDRESS						
CITY-ST-ZIP	D INCH TONK IN		DELETE	4.4 CITY - S1 - ZIP					C	Aprophes
TITLE	RODRIQUEZ, CHARLES J	(L.J DELETE	5.1 TOLE	1.20	rictor Kris Rod	ere a 7		Change	☐ Addition
NAME CIDECT ADDRESS	1345 AVE OF THE ANERICAS			5.2 NAME	100	12 2134	119514			
STREET ADDRESS	NEW YORK NY			5.3 STREET ADDRESS						
CITY-ST-ZIP TITLE	T		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	2/4	13,de, 24			Change	Addition
NAME	SUAZO, MILINDA M		and an experience in the	6.2 NAME		v			orange	- randon
STREET ADDRESS	ONE ROCKYELLER PLAZA, SU	ITE 2420		6 3 STREET ADDRESS]
OITY OF TIP	NEW YORK NY			S A SITULATION OF THE	1					i

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.