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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Feb 17 1998 8:00am Secretary of State

	1998	DIVISION OF CO	PORATIONS		,	
	MENT # G872 NDAM ESTATES, INC.	36 (7)			ITAN BIAN OLOH DIBIK DIBIK BIBN ANDA 1884	
Principal Place	of Business	Mailing Address			INDER OFFIE DERET ALBERT ALBERT DERET 1901	
230 W. 55 ST., SUITE 25-0 230 W. 55 ST., SUITE 2 NEW YORK NY 10019 NEW YORK NY 10019			•			
				DO NOT WRITE IN 3. Date Incorporated or Qualified	I THIS SPACE	
				01/03/1984		
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		13-3206541	Not Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State		- Floring Committee Francisco		
23	,	28]		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation owes or has paid		
24	25	[29]	0	Personal Property Tax due June 30). Yes No	
	9. Name and Address of Cur	rent Registered Agent		10. Name and Address of New Regis	stered Agent	
	OOP, RICHARD J.		81 Nam	10		
512			82 Stree	82 Street Address (P.O. Box Number is Not Acceptable)		
	LINCOLN RD MALL		83			
MIM	IMI BEACH FL 33139					
			84 City		FL 85 Zip Code	
SIGNATURE	othe provisions of Sections 607 (significant agent, or both, in the St in familiar with, and accorpt the ob-			ed corporation submits this statement for the pur orporation's board of directors. I hereby accept (ture required when reinstating)	pose of changing its registered he appointment as registered	
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	D	DELETE	1.1 TITLE		Change Addition	
NAME	BENDAHAN, ALBERT		1.2 NAME			
STREET AODRESS	230 W 55 ST		1.3 STREET ADDRESS	s		
CITY-ST-ZIP	NEW YORK NY		1.4 CITY - ST - ZIP			
TITLE '	S	DETE LE	21 TITLE		☐ Change ☐ Addition	
NAME	BENDAHAN, SALLY		22 NAME			
STREET ADDRESS	230 W. 55 ST. NEW YORK NY		2 3 STREET ADDRESS	S	(
CITY-ST-ZIP	NEW TORK III	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
TITLE .		புள்	3.2 NAME		El Amilio El Maditali	
STREET ADDRESS			3.3 STREET ADDRESS	s		
CITY-ST-ZIP			34. CITY-ST-ZIP			
TITLE		DELETE	4 1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	s	İ	
CITY-ST-7IP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY - ST - ZIP			
TITLE		DELETE	51 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS	*		
CITY-ST-ZIP TITLE		DELFIE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition	
NAME		Part Section	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS	s	,	
CITY-ST-ZIP			64 CITY - 51 - ZIP			

14. Thereby 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 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 Block 12 or Block 13 if charged or on an apartment with an address

SIGNATURE:

SIGNATURE: