FILED

Feb 17, 1999 8:00am

Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # M51119

1. Con	POPULATION NAME WIND THE POPULATION NAME POPULATION NAME WIND THE POPULATION NAME FOR THE PO	19 ·		02-17-1999 90017 001 ***	*150.00
477 MAD	al Place of Business ISON AVE DOR RK NY 10022	Mailing Address 477 MADISON AVE 14TH FLOOR NEW YORK NY 10022 US			•
21	Country 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country	3. Date Incorporated or Qualifed 04/28/1987 4. FEI Number 59-2824411 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. Trust Fund Contribution 8. This corporation owes the current year of the personal Property Trust Fund Contribution	, Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be
SL	9. Name and Address of Currer & C CORPORATE SERVICES, INC. 11 S. BISCAYNE BLVD. JITE 3000 AMI FL 33131 Int to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligations.	-	83	Personal Property Tax. 10. Name and Address of New Registere. ress (P.O. Box Number is Not Acceptable) Praction submits this statement for the purpose of n's board of directors. I hereby accept the appoint	☐ Yes ☐ No d Agent
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D. SEYMOUR, W ZISES 477 MADISON AVE., 14TH FLOOR NEW YORK NY 10022	DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	1
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME		☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP TITLE IAME STREET ADDRESS ITY-ST-ZIP TITLE		☐ DELETE	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 2. NAME 3. STREET ADDRESS 4. CITY-ST-ZIP		Change Addition
AME			1777 5		ſ

Indicated on this annual report or 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 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 with all other like empowered.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE: SE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REET ADDRESS

REETADDRESS

.-ST-ZIP

VΕ

1/25/99 212.872.9610

☐ Change

☐ Change

☐ Addition

☐ Addition