

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

98 MAY 27 PM 4:31

LIMITED LIABILITY COMPANY ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northing Secretary of State DIVISION OF CORPORATIONS
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FILING FEE	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75
Make Check Payable To: FLORIDA DEPARTMENT OF STATE	

1. Name and Mailing Address of Limited Liability Company	DOCUMENT # M96000000068
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J&B MANAGEMENT OF DELAWARE, L.L.C.
ONE EXECUTIVE DRIVE
FORT LEE, NJ 07024

1a. Principal Place of Business Address

ONE EXECUTIVE DRIVE
FORT LEE, NJ 07024

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02/21/1996	DE
City & State		City & State		4. FEI Number	☐ Applied For ☐ Not Applicable
Zip	Country	Zip	Country	65-0584152	
				5. Date of Last Report	6. Certificate of Status Desired

7. Name and Address of Current Registered Agent		8. Name and Address of New Registered Agent/Officer	
NATIONAL CORPORATE RESEARCH, LTD. 1406 HAYS STREET SUITE 2 TALLAHASSEE, FL 32301		Name Street Address (P.O. Box Number is Not Acceptable) 400002546014-4 Suite, Apt. #, etc. -06/03/98-01053-02 ****188.75 ****188.75 City FL Zip Code	

I, Pursuant to the provisions of Sections 608.416 and 608.608, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Signature Required) (New Registered Agent Signature Required when registering)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	LUCIANI, JOHN	ONE EXECUTIVE DRIVE	FORT LEE, NJ 07024
MGRM	RODIN, BERNARD M.	ONE EXECUTIVE DRIVE	FORT LEE, NJ 07024

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information indicated on this Annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: _____