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Apr 30 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000001908
1. Corporation Name

LINCOLN ROAD MARKETING, INC.

Principal Place of Business

Mailing Address

1205 DREXEL AVENUE
MIAMI BEACH, FL. 33139

3. Date Incorporated or Qualified

4/4/97

4. FEI Number

65-0749141

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 910 LINCOLN ROAD

26 910 LINCOLN ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 MIAMI BEACH, FL

28 MIAMI BEACH, FL

Zip

Country

Zip

Country

24 33139

25 US

29 33139

30 US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FINVARB, ROBERT I.
2200 MUSEUM TOWER
150 W. FLAGLER STREET
MIAMI, FL. 33130

81 Name

ALLEN, LOUISE

82 Street Address (P.O. Box Number is Not Acceptable)

2200 MUSEUM TOWER

83

150 W. FLAGLER STREET

84 City

MIAMI, FL

FL

85 Zip Code

33130

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature (typed or printed name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DIRECTOR ☐ DELETE
NAME BRODY, SHERNA
STREET ADDRESS 1000 BLDG, 1014 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH, FL. 33139

TITLE DIRECTOR ☐ DELETE
NAME CALVANI, GRACE
STREET ADDRESS 235 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH, FL. 33139

TITLE DIRECTOR ☒ DELETE
NAME FINGER, TRACEY
STREET ADDRESS 629 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH, FL. 33139

TITLE DIRECTOR ☐ DELETE
NAME GILBERT, JANE
STREET ADDRESS 924 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH, FL. 33139

TITLE DIRECTOR ☐ DELETE
NAME GOLDSTEIN, CHARLES
STREET ADDRESS 24 COLLECTION, 744 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH, FL. 33139

TITLE DIRECTOR ☒ DELETE
NAME LASKY, HANNAH
STREET ADDRESS 533 LINCOLN ROAD
CITY-ST-ZIP MIAMI BEACH, FL. 33139

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

SECRETARY/DIRECTOR ☒ Change ☐ Addition

12 NAME

BRODY, SHERNA

13 STREET ADDRESS

1000 BLDG, 1014 LINCOLN ROAD

14 CITY-ST-ZIP

MIAMI BEACH, FL. 33139 ☐ Change ☐ Addition

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

PRESIDENT/DIRECTOR ☐ Change ☒ Addition

32 NAME

SCHNITZER, RAY

33 STREET ADDRESS

910 LINCOLN ROAD

34 CITY-ST-ZIP

MIAMI BEACH, FL. 33139 ☐ Change ☐ Addition

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

700002508447
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***70.00

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

4.30

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

TREASURER/DIRECTOR ☐ Change ☒ Addition

OROVITZ, ALAN J.

11 ISLAND AVENUE - APT 907

MIAMI BEACH, FL. 33139

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this filing 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ALAN J. OROVITZ, TREASURER

APRIL 24, 1998 (305) 531-5152

CP2E037 (10/97)