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 PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 31, 2000 8:00 am Secretary of State 05-31-2000 90068 030 ***150.00

DOCUMENT #	P04858
1. Corporation Name	

PB-SB	INVEST	MENT!	3 INC
rn-an	HIVLUI	1411-1414	<i>,</i> 1110

200	00				DI BILI BIBLI BIBLI
Principal Place	of Business	Mailing Address			
WORLD TRAD	É ÇTR.	250 WEST STREET			
TAX DEPT-28TH		TAX DEPT. 9TH FLOOR		DO NOT WRITE IN	THIS SPACE
KEW YORK NY	10004	NEW YORK NY 10013 US		3. Date Incorporated or Qualifed	
JS	•	US	Λ	02/01/1985	
		1 - 44 00 - 411	- , -/} }	4. FEI Number	Applie
2. Principal Pl	ace of Business	2a. Mailing Address	بالماركا والمراجع	40.0400000	Not A
1		26 World	rade lenter	13 3 130000	\$8.75 Add
_ Suite, Apt. i	#, etc.	Suite, Apt. # etc.	20,1 /1	5. Certifcate of Status Desired	Fee Requ
2		27 /UX Dept.	<u>aoth +1.</u>		
_ City & State	•	City/& State	AN	6. Election Campaign Financing	\$5.00 Ma Added to F
3		28 /Yew Yor A	_/ <u> </u>	Trust Fund Contribution	
Zip	Country	Zip.	Coufitry	8. This corporation owes the current ye	ar≀ntangible ☐Yes ☐
4	25		30	Personal Property Tax.	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Regist	ered Agent
			81 Name		
	ORPORATION SYSTEM		82 Street A	ddress (P.O. Box Number is Not Acceptable)	
1200	S. PINE ISLAND ROAD				
PLAN	ITATION FL 33324		83		
					Ne 7:- C-
			84 City		FL 85 Zip Co
					se of changing its re
office or re agent. I as	egistered agent, or both, in the State π familiar with, and accept the obliga	of Flonda, Such change was au tions of, Section 607.0505, Flori		corporation submits this statement for the purporation's board of directors. I hereby accept the quired when reinstating)	TE
office or re agent. I as SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered age OFFICERS AN	of Florida, Such change was autitions of, Section 607.0505, Floridate of applicable. (NOTE:	da Statutes. Registered Agent signature re-	Zuon 3 Dourd of directors. The cost decesp.	TE
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I nereby certify that the information supplied with this alitting does not qualify for the opening that the information is supplied with 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 an 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 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 Block 12 or Block 13 if changed, or on an effect of the opposition of the oppo

SIGNATURE: