SECOND_NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. MAJOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

11100 SANTA MONICA BLVD., #500

SIGNATURE: Lune Parable Lib KUNIAIKAWAHARA

LOS ANGELES CA 90025

STREET ADDRESS

CITY-ST-ZIF

Sep 09 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (6)LFS CAPITAL CORP. Principal Place of Business Malling Address 11100 SANTA MONICA BLVD. 11100 SANTA MONICA BLVD. SUITE 500 SUITE 500 LOS ANGELES CA 90025 DO NOT WRITE IN THIS SPACE LOS ANGELES CA 90025 3. Date Incorporated or Qualified 10/23/1985 2. Principal Place of Business 4. FEI Number Applied For 2a. Mailing Address 22-2552974 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes \(\subseteq \text{No} \) Zip Country Zip Country 24 29 25 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City 85 Zip Code 11. Pursuant to the provisions of sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE CR2E034 (5/98) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE ___ DELETE Change Addition MCSWEEN, ROBERT D NAME 1.2 NAME 135 E. 57TH STREET STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY 10022** 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE 2.1 TITLE TITLE __ Change __ Addition SELLERS, WALLACE O. NAME 2.2 NAME 11100 SANTA MONICA BLVD., #500 STREET ADORESS 2.3 STREET ADDRESS LOS ANGELES CA 90025 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE **DELETE** 3.1 TITLE ___ Change Addition BRIAN, CLARK 3.2 NAME NAME 135 E. 57TH STREET STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY 10022** CITY-ST-ZIP 3.4 CITY-ST-ZIP 4.1 TITLE TITLE DELETE KAMINSKY, JOSEPH 4.2 NAME NAME 135 E. 57TH STREET STREET ADDRESS 4.3 STREET ADDRESS **NEW YORK NY 10022** CITY-ST-ZIF 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE Change _ Addition SMITH, CLIFFORD R NAME 5.2 NAME 11100 SANTA MONICA BLVD., #500 STREET ADDRESS 5.3 STREET ADDRESS LOS ANGELES CA 90025 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE TITLE DELETE .. Change Addition KAWAHARA, JUNE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby 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 supplemental 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 changed, or on an attachment with an address. (310) 966-2005

FILED

Profit Corporation Annual Report – 1998 Document No.: P07838 Corporation Name: LFS Capital Corp.

<u>Delete</u>

#12 Continued:

D Red, Jon 135 E. 57th Street New York, NY 10022