

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

FILED
May 13 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P09107 (4)
1. Corporation Name
THE CUSTOM SHOP BROADWAY CORPORATION

Principal Place of Business 18 EAST 50TH STREET NEW YORK NY 10022	Mailing Address 18 EAST 50TH STREET NEW YORK NY 10022
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 02/17/1986	
21		26		4. FEI Number 22-1724728	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22		27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State		City & State		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
23		28			
Zip	Country	Zip	Country		
24	25	29	30		

9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC 1201 HAYES ST STE - 105 TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81	Name
				82	Street Address (P.O. Box Number is Not Acceptable)
				83	
				84	City
				FL	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

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input type="checkbox"/> DELETE		1.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LEVITT, MORTIMER			1.2. NAME			
STREET ADDRESS	10 EAST 82ND STREET			1.3. STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			1.4. CITY - ST - ZIP			
TITLE	TD	<input type="checkbox"/> DELETE		2.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	RUBENSTEIN, ESTELLE			2.2. NAME			
STREET ADDRESS	215 EAST 68TH STREET			2.3. STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			2.4. CITY - ST - ZIP			
TITLE	S	<input type="checkbox"/> DELETE		3.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	CHAFETZ, MALCOLM			3.2. NAME			
STREET ADDRESS	350 FIFTH AVE			3.3. STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			3.4. CITY - ST - ZIP			
TITLE	VD	<input type="checkbox"/> DELETE		4.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	LEVITT, ANNE MARIE			4.2. NAME			
STREET ADDRESS	10 EAST 82ND STREET			4.3. STREET ADDRESS			
CITY - ST - ZIP	NEW YORK NY			4.4. CITY - ST - ZIP			
TITLE	VD	<input checked="" type="checkbox"/> DELETE		5.1. TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	RAWDON, KATHLEEN			5.2. NAME	Eberly, Kathy		
STREET ADDRESS	18 E. 50TH ST.			5.3. STREET ADDRESS	402-412 Route 23		
CITY - ST - ZIP	NEW YORK NY			5.4. CITY - ST - ZIP	Franklin, NJ 07416		
TITLE		<input type="checkbox"/> DELETE		6.1. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME				6.2. NAME			
STREET ADDRESS				6.3. STREET ADDRESS			
CITY - ST - ZIP				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.

SIGNATURE:

4/29/98 (973)827-9135

CR2E034 (10/97)