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

May 05 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P09171 (0) SI BOCA, INC. Principal Place of Business Mailing Address C/O SIBAG HOLDING CORP 1201 MARKET STREET SUITE 1402 C/O SIBAG HOLDING CORP 1201 MARKET STREET SUITE 1402 DO NOT WRITE IN THIS SPACE WILMINGTON DE 18801 WILMINGTON DE 19801 3. Date Incorporated or Qualified 02/19/1986 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 22-2686276 Not Applicable Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible 29 Personal Property Tax due June 30. 24 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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 ponted name of ingestered agent and life if applicable INO11: Registered Agent signature required when reinstating) DATE 12. CRZE034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change Addition TIE: F 1.1 TIFLE MENHARD, HANS NAME 12 NAME 35 BOULDER BROOK RD STREET ADDRESS 1.3 STREET ADORESS **GREEN WICH CT** CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition TITLE DELETE 21 TITLE Change CHRISTING M. NEWDERK DEIN BROOD MITTAG, JUERGEN 33 EASTERN DRIVE STREET ADDRESS 2.3 STREET ADDRESS ARDSLEY NY WILMINGTON, DE CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition TITE F GISH, DENINIS 3.2 NAME MAME 21 ENSIGN LANE 3.3 STREET ADDRESS STREET ADORESS MASSAPEQUA NY CITY-ST-ZIP 34. CITY-ST-ZIP ☐ DELETE PD Change Addition TITLE 4.1 TITLE BLAKER, EILEEN NAME 4. 2 NAME 17 CHERRY TREE LANE STREET ADDRESS 4.3 STREET ADDRESS RIVERSIDE CT CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 T/TLE JOHANSSON, GUNNAR. NAME 5.2 NAME 51 W. MAIN ST. STREET ADDRESS 5.3 STREET ADDRESS **BROOKSIDE NJ** CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE WILLIAM S. ABELSON 39 ELSTON ROAD

14. Thereby 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 suppliemental 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 1

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

302-654-7660

FILED