

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Jen Smith  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

1995 MAY - 1 AM 10: 21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Corporation Name AVO MULTI-IMP SERVICES CORPORATION	DOCUMENT # P10633 (6)
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Mailing Address *TBO INC. SVCS, INC. 1211 AVENUE OF THE AMERICAS NEW YORK, NY 10036-8765 525 Fifth Avenue New York, NY 10017-2413	Principal Place of Business *TBO INC. SVCS, INC. 1211 AVENUE OF THE AMERICAS NEW YORK, NY 10036-8765 525 Fifth Avenue New York, NY 10017-2413
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DO NOT WRITE IN THIS SPACE

2. Mailing Address 21	2a. Principal Place of Business 26	3. Date Incorporated or Qualified 07/02/1986	3a. Date of Last Report 03/16/1993
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FBI Number 22-1854730	Applied For Not Applicable
23 City & State	28 City & State	5. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>
24 Zip	25 Country	29 Zip	30 Country
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or 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 607.0503 or 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE P/D	ESQUIVEL, RUBEN E.	1.1 TITLE P/D	Andrew R. Buck
1.2 NAME	4271 BRONZE WAY	1.2 NAME	4271 Bronze Way
1.3 STREET ADDRESS	DALLAS TX	1.3 STREET ADDRESS	Dallas, Tx
1.4 CITY - ST - ZIP		1.4 CITY - ST - ZIP	
2.1 TITLE S/N/T	WELLS, DONALD T.	2.1 TITLE S/N/T/P	Thomas B. Evans
2.2 NAME	4271 BRONZ WAY	2.2 NAME	4271 Bronze Way
2.3 STREET ADDRESS	DALLAS TX	2.3 STREET ADDRESS	Dallas, Tx
2.4 CITY - ST - ZIP		2.4 CITY - ST - ZIP	
3.1 TITLE D	BODE, FRIEDHELM	3.1 TITLE P	Michael J. Timbers
3.2 NAME	1211 AVE OF THE AMERICAS	3.2 NAME	15 Inverness Way East
3.3 STREET ADDRESS	NEW YORK, NY 10036	3.3 STREET ADDRESS	Englewood, CO 80150
3.4 CITY - ST - ZIP		3.4 CITY - ST - ZIP	
4.1 TITLE D	HAEGELE, JACK E.	4.1 TITLE	
4.2 NAME	1211 AVE OF THE AMERICAS	4.2 NAME	
4.3 STREET ADDRESS	NEW YORK NY	4.3 STREET ADDRESS	800001478378
4.4 CITY - ST - ZIP		4.4 CITY - ST - ZIP	-05/08/95--01026--016
5.1 TITLE V	LEVINE, ROBERT B.	5.1 TITLE	***400.00 ***200.00
5.2 NAME	124 S MARION PLACE	5.2 NAME	
5.3 STREET ADDRESS	ROCKVILLE CENTRE NY	5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP		5.4 CITY - ST - ZIP	OFFICES NOT DELETED
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP	SCC 5-1-95

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607.07, Florida Statutes; and that my name appears in Block 12 or Block \_\_\_\_\_

SIGNATURE: Robert B. Levine ROBERT B. LEVINE 4/24/95 212-850-8500  
VICE-PRESIDENT Date Daytime Phone #