PROFIT CORPORATION ANNUAL REPORT 1996 PROFIT CORPORATION ANNUAL REPORT DIVISION OF CORPORATIONS						
	MENT # P1106 AN FINANCIAL SERVICES	- ()			ni Bibli Bibli Bibli	AIDH BISEL BIBIK VATL
rincipa; Place	of Business	Mailing Address				
100 PARK AVE		100 PARK AVE. NEW YORK NY 10017				
MEN TOTAL IN		100		3. Date Incorporated or Qualified 08/11/1986	3a. Date o	f Last Report
		2a. Mailing Address		4. FEI Number	00,01,	Applied For
, Principal Pla	ace of Business	26. Walling Address		13-3043478		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt #, etc		5. Certificate of Status Desired	\$	8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax	under s. 199 032.
<u> </u>	9. Name and Address of Curre	29	30	Florida Statutes 10. Name and Address of New Re		
		And the grant of the same of t	81 Name			
	CORPORATION SYSTEM 10 SOUTH PINE ISLAND ROAD)	82 Street Ad	ddress (P.O. Box Number is Not Acceptal	ble)	
	INTATION FL 33324		83			
			L			35 Zip Code
			84 City		FL	
1. Pursuant t	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	b02 and 607,1508; Florida Statuti te of Florida, Such change was a coations of Section 607,0505; Ele	es, the above named co authorized by the corpor orida Statutes	orporation submits this statement for the pration's board of directors. Thereby accept	ourpose of cha of the appointm	nging its registered sent as registered
					[JAIL	
SIGNATURE.	Signature, aplication printing risks of registered a OFFICERS A		I (Registeral Agent's griature re	ngwed when renshred) ADDitTIONS/CHANGES 10 OFF	DAIL	RECTORS IN 12
BIGNATURE	OFFICERS A	agost and the Lapple able (NO)	I (Registeral Agent's gradure re	ADDITIONS/CHANGES 10 OFF ABSISTANT SECRETARY	DAIL	
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NEW YORK NY 10017

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14. If do hereby certify that the information supplied with this tang is voluntably turnished and does not qualify for the exemption stated in Section 119 07(3)(k). Florida Statutes I further certify that the information indicated on this any safe report or supplymental annual report is true and accurate and that my signature shall have the same lingal 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 617, Florida Statutes and that my name appears in Block 13 or Block 13 or Block 13 or an attainment with an address

61 TITLE

6.2 NAME

6 3 STREET ADORESS

SIGNATURE:

STEIN, DAVID F

100 PARK AVE.

CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

(212)850-180-2

Change Addition