

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

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90185 018 ***150.00

DOCUMENT # P12571

1. Corporation Name
HERZOG, HEINE, GEDULD, INC.

Principal Place of Business 525 WASHINGTON BLVD. 10TH FLOOR JERSEY CITY NJ 07310 US	Mailing Address 525 WASHINGTON BLVD. 10TH FLOOR JERSEY CITY NJ 07310 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country 24		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29		3. Date Incorporated or Qualified 12/17/1986	
				4. FEI Number 13-1955436	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324				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	
TITLE	CD HERZOG, JOHN 1 PIEREPONT STREET BROOKLYN NY
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	EVPD GERACI, ANTHONY ONE OYSTER BAY DR RUMSON NJ
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	PD GEDULD, EMANUEL 279 CENTRAL PARK WEST, APT. 3B NEW YORK NY
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	SVPS CHRISTOFILIS, C. CHARLES 118 A HILLCREST AVE. W. PATERSON NJ
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	DV GEDULD, IRWIN 4000 ISLAND BLVD., WM IS NO. MIAMI BEACH FL
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	CFO BRADLEY, KEN 45 WHITNEY AVENUE FLORAL PARK NY
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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, with all other like empowered.

SIGNATURE: *Kenneth Bradley* VP, CFO 4/26/99 1-201-418-4162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

KENNETH BRADLEY

CR2E034 (11/98)