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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mordham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P16187

(7)

1. Corporation Name

UGB CORPORATION

Principal Place of Business

609 FIFTH AVENUE
NEW YORK NY 10017

Mailing Address

609 FIFTH AVENUE
NEW YORK NY 10017



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

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30

9. Name and Address of Current Registered Agent

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

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 607.1506, 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 607.0506, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Director

Signature of Agent for Service of Process

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	[] DELETE
PD	BANZER, JOHN W	56 STONWAYCK DR	CHATHAU NJ	
VP	GROSHEN, MARC W	104 MACARTHUR DR	EDISON NJ	
TD	DEMARTINO, JOHN J.	21 N. CHATSWORTH AV	LARCHMONT NY	
VP	NOWAKOWSKY, BOB	5 CHESTER ST	ARDSLEY NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY - ST - ZIP	9. TITLE	10. NAME	11. STREET ADDRESS	12. CITY - ST - ZIP	13. TITLE	14. NAME	15. STREET ADDRESS	16. CITY - ST - ZIP	17. TITLE	18. NAME	19. STREET ADDRESS	20. CITY - ST - ZIP

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14. I do hereby certify that the information supplied within this filing is voluntarily furnished 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 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:

Marc Groshen Marc Groshen 1/26/96 621337-8221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)

3-30-1996