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

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # *P22137*

1. Corporation Name

FIRST MONTAUK SECURITIES CORP.

Principal Place of Business
Parkway 109 Office Center
328 Newman Springs Road
Red Bank, NJ 07701

Mailing Address
Parkway 109 Office Center
328 Newman Springs Road
Red Bank, NJ 07701

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed
12/15/1988

4. FEI Number | **Applied For**
11-2644141 | Not Applicable

2. Principal Place of Business	**2a. Mailing Address** [26]
Suite, Apt. #, etc.	Suite, Apt. #, etc. [27]
City & State	City & State [28]
Zip — Country [25]	Zip — Country [29] [30]

5. Certifcate of Status Desired ☐ — **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM·
1200 S. PINE ISLAND ROAD
PLANTATION FL33324

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		**13.**	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**	
TITLE PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME KURINSKY, HERBERT		1.2 NAME		
STREET ADDRESS 328 NEWMAN SPRINGS ROAD		1.3 STREET ADDRESS		
CITY-ST-ZIP RED BANK, NJ		1.4 CITY-ST-ZIP		
TITLE VST	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME KURINSKY, WILLIAM J.		2.2 NAME		
STREET ADDRESS 328 NEWMAN SPRINTS ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP RED BANK, NJ		2.4 CITY-ST-ZIP		
TITLE D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME KURINSKY, WILLIAM J.		3.2 NAME		
STREET ADDRESS 328 NEWMAN SPRINGS ROAD		3.3 STREET ADDRESS		
CITY-ST-ZIP RED BANK, NJ		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (11/98)

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: _WILLIAM J. KURINSKY_ 4/23/99 732-842-4700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #