SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

DORBY FROCKS, LTD. CORPORATION

FILED Jul 28 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 463 SEVENTH AVENUE 463 SEVENTH AVENUE NEW YORK NY 10018 NEW YORK NY 10018 DO NOT WRITE IN THIS SPACE 3a, Date of Last Report 3. Date Incorporated or Qualified 04/10/1990 04/09/1996 2. Principal Place of Business 2a, Maiting Address 4. FEI Number Applied For 13-1833444 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Added to Fees Trust Fund Contribution Zip Country Zιρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GREEN, BEVERLY 10205 COLLINS AVE 82 Street Address (P.O. Box Number is Not Acceptable) BAL HARBOR FL 33154 **B3** City Zip Code 11. Pursuant to the provisions of Soctions 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 agont and title if applicable (NOTE: Rog stored Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 THUE SCHWARTZ, STANLEY NAME 1.2 NAME 463 SEVENTH AVE. STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY** City-St-7i6 1.4 CITY - ST - ZIP SD ☐ DELETE ☐ Change Addition THLE 2.1 TITLE DAVIDOFF, RICHARD S. NAME 2.2 NAME 51 EAST 42ND STEET STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIF 2. 4 CITY - \$1 - ZIF DELETE Change Addition TITLE 3.1 TITLE GOLDEN, RICHARD L. 32 NAME 463 SEVENTH AVE. STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE ☐ Change Addition 4.1 THLE GOLDEN, ANN NAME 4. 2 NAME 463 SEVENTH AVE. STREET ADDRESS 4.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE GREEN, BEVERLY 5.2 NAME NAME 10205 COLLINS AVENUE STREET ADDRESS 5.3 STHEET ADDRESS BAL HARBOR FL 5.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- 2IP CITY-ST-ZIF

14. I do 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 eath; that I am an officer or director of the corporation of the ecoiver or trustee empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change

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