## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLOR:DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P32267

(7)

DOCUMENT # 1. Corporation Name DI ANTATIONI I VI E INIC

PLA	NIATION LYLE INC.						
Principal Place	e of Business	Mailing Address				HILL F <b>ur</b> i <b>dia</b> ir <b>dir</b> if	IDII BIDII BIDII BIDII (80)
% WEISSBARTH ALTMAN & MICHAELSON % WEISSBARTH ALT 156 W. 56TH STREET 156 W. 56TH STREE NEW YORK NY 10019 NEW YORK NY 1001			T	AELSON			
		NEW YORK NI 1001	3		3. Date incorporated or Qualified 12/24/1990	3a. Date of L	ast Report 21/1995
	2. Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For
26     Suite, Apt, #, etc.     Suite, Apt, #, etc.     Suite, Apt, #, etc.     Suite, Apt, #, etc.					13-3353978	13-3353978 Not Applic	
22 27					5. Certificate of Status Desired		<b>3.75</b> Additional Fee Required
City & State City & State 28					6. Election Campaign Financing		<b>5.00</b> May Be
Zıp <b>24</b>	Country   Z <sub>1</sub> ρ   29		Country		Trust Fund Contribution Added to Fees  8. This corporation fias liability for intangible tax under s 199.032. Florida Statutes ☐ Yes ☐ No		
	9. Name and Address of Currer		1001		10. Name and Address of New F	_	
			81	Name			-i
CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE FL 32301					ress (P.O. Box Number is Not Acceptab	ole)	
						··	
IALLA	MASSEE FL 32301		88				
			84	City		FL 85	Zip Code
SIGNATURE _	Signative, typed or printed name of reperent spiral OFFICERS AN		c feet tent Age	if signistrae regime	ADDITIONS/CHANGES TO OFF	DATE	CTOPS IN 12
TITLE	PO	☐ DELEIE	1 1 TITLE			Cha	
NAME	MICHAELSON, ROBERT T.		1.2 NAME				
STREET ADDRESS	156 W. 56TH STREET		1.3 STREET	ADDRESS			
CITY - ST - ZIP	NEW YORK NY		1 4 Cily - S	T - ZIP			
TITLE NAME	GANG, MARTIN	DELETE	2 1 TITLE			☐ Cha	inge 🔲 Addition
STREET ADDRESS	156 W. 56TH STREET		2.2 NAMÉ	4005/20			
CITY-ST-ZIP	NEW YORK NY		2.3 STREET 2.4 C/TY - S				
TITLE	STD	DELFTE	3 1 Tatus	211		Cna	nge Addition
NAME	Baker, Edwin H.		3.2 NAME	İ			
STREET ADDRESS	250 PARK AVENUE		3.3 STREET	ADDRESS			
C+TY-ST-ZIP	NEW YORK NY		3.4 CITY+S	I - ZIP			
TITLE	AS BOSS CODA D	DELETE	4 1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Cha	nge 🔲 Addition
NAME STREET ADDRESS	ROSS, CORA D 250 PARK AVE		4.2 NAME				
CITY-ST-ZIF	NEW YORK NY		4.3 STREET				
TITLE		DELETE	44 CHY-S 5 1 TIFLE	1 - ZiP		☐ Cha	nge Addition
NAME		<b>_</b>	5.2 NAME			[] C118	ige   Modifioli
STREET ADDRESS			5 3 STREET	ADORESS			i
CITY-ST-ZIP			5.4 CITY - S	i			ļ
TATLE		DELETE	6 1 TITLE			☐ Cha	nge 🔲 Addition
NAME			C O ALABATE				1

6.3 STREET ADDRESS

6.4 CITY - 51 - 7-P 14. I do hereby certify that the information supplied by the stilling is voluntarily furnished and does not qualify for the exemption stated in Section 119,07(3)(4). Florida Statutes. I further certify that the information indicated on this agricular report or supplemental annual report is true and accurate and triat my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if Changed, to on an attachment with an address.

SIGNATURE:

STREET ADDRESS

CITY - ST - ZIP

SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

APRIL 19, 1996 (212) 351-4500