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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P32267
1. Corporation Name
PLANTATION LYLE INC.

(7)

FILED Apr 21 1997 8:00am Secretary of State

* WEISSBARTH ALTMAN & MICHAELSON 156 W. 56TH STREET NEW YORK NY 10019		Mailing Address % Weissbarth Altman & Michaelson 156 W. 56TH STREET NEW YORK NY 10019-3800			3. Date Incorporated or Qualified 12/24/1990	d 3a. Date of Last Report 04/30/1996			
2. Principal Pi	lace of Business	2a. Mailing Address			4. FEI Number	·	TAp	plied For	
21		26	26			13-3353978 Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			F.O.10 1 1011 0 1 1		\$8.75	Additional
22		27	27			5. Certificate of Status Desired		Fee Re	quired
City & State		City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	28			Trust Fund Contribution		Added t	
Zip	Country	Country Zip		Country		8. This corporation has liability for i	ptangible ta	cunder s	199.032,
24	25	29	30	30			Yes 🗌 No		
	9. Name and Address of Cur	rent Registered Agent		Ι		10. Name and Address of New Re	gistered Ag	ent	
	PORATION SERVICE COMPA	NY		81	Name				
	I HAYES STREET			82	Stroot Ado	dress (P.O. Box Number is Not Acceptab	(a)		
ia tali	LAHASSEE FL 32301			UZ.	Sliber Auc	tress (r.o. box radinar is not Acceptab	16)		
**				83					
				84	City		FL	85 Zip (Code
office or re agent. I as SIGNATURE	egistered agent, or both, in the St m familiar with, and accept the ob Signature, typed or printed name of registered	ate of Florida. Such change w iligations of, Section 607.0505	as authorize , Florida Sta NOTE Registri 13. 1.11 1.21	ed Ago TITLE	/ the corporals.	rporation submits this statement for the pation's board of directors. I hereby acception wired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND D	tment as	registered
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	GANG, MARTIN 156 W. 56TH STREET NEW YORK NY STD BAKER, EDWIN H. 250 PARK AVENUE	DELETE	2.21 2.3 5 2. 4 3.11 3.21	CITY- TITLE NAME	ADDRESS ST-ZIP			Change	Addition Addition
STREET ADDRESS	NEW YORK NY				ADDRESS				
CITY-ST-ZIP	AS	T nevere			S1-ZIP			Charte	TI NAME OF
TITLE	ROSS, CORA D	☐ DELETE		TITLE			L.	Change	Addition
NAME	250 PARK AVE			NAME					1
STREET ADDRESS	NEW YORK NY		4.3 3	4.3 STREET ADDRES		•			1
CITY-ST-ZIP	NEW TORK IN		4.4 (4.4 C(TY - S1 - Z(
TITLE		☐ DELETE	5.1 3	5.1 TITLE			_] Change	Addition
NAME			521	NAME					
STREET ADDRESS			5.3 5	STRFET	ADDRESS				
CITY-ST-ZIP			5.4 (CITY-5	ST- ZIP	•			
TITLE		☐ DELETE		1 THUE				Change	☐ Addition
NAME				NAME				-	}
STREET ADDRESS					ADDRESS				
CITY-ST-7IP					ADDRESS S1 - 71P				
L111-31-79 1			■ p. // i	Y - 5	A - 704				

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 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 chapterd, or on a cuttachment with an address.

COUNTY OF THE PARTY OF THE PART

/rt-

212-265-7500