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PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P35178 (3) 1. Corporation Name PROPP & COMPANY, INC.							
rinopal Place of Business  545 MADISON AVENUE NEW YORK NY 10022		Mailing Address  545 MADISON AVENUE NEW YORK NY 10022		I FOOLINGER HOL LARGE GILDER THRILL TURK	)	<b>     </b>	DIBIL DIBIL HUUF
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Principal Pla	nce of Business	2a, Mailing Address		08/21/1991 4. FEI Number	1 0	1/20/19	upplied For
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Suite, Apt. #	, etc.	Suite, Apt. #, etc.					Additional
		27		5. Certificate of Status Desired			Required
Oily & State		Orty & State		6. Election Campaign Financing		\$5.00	May Be
		28		Trust Fund Contribution			to Fees
Zip	Country	Zip	Country	8. This corporation has liability for I	<b>3</b> ./	under s	199.032,
	25 9. Name and Address of Currer	29  nt Registered Agent	[30]	Florida Statutes Yes  10. Name and Address of New R		cent	
			81 Name	10.		<b>3</b> 0	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324			82 Street Ad	ddress (P.O. Box Number is Not Acceptab	ile)		· • • · · · · · · · · · · · · · · · · ·
			83			<del></del>	
			84 City			ac Zin	Code
			G4 City		FL	<b>85</b> Zip	Code
or register famil ar wit NATURE	ed agent, or both, in the State of Flori h, and accept the obligations of, Sect	da. Such change was authoriz lion 607.0505, Florida Statutes	red by the corporation's b s.	poration submits this statement for the pur loard of directors. I hereby accept the appoint	ointment as r	egistered	egistered offic agent. I am
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oath, that I am an officer or director of the corporation of 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 chapter 607 and into 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 chapter 607 and into the corporation of the corporation of

SIGNATURE:

Synla & Flynn

22-339-7170