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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(6)

1997

DOCUMENT # P36020

CHAIN S	TORE PUBLISHING CORI	PORATION							
Principal Plac 3922 COCONUT TAMPA FL 3361 US	PALM DR.	TAMPA FL 33619-1389	3922 COCONUT PALM DR			סט אנטונ פנונסף נוונס פואוו פפו וסבנונסטנ ו 	PE NEWYORK (CONCORPED IN	IBAR DIARA DIRIA I	/1002 FORT
		•				3. Date Incorporated or Qualified 10/22/1991		ate of Last R 12/1996	eport
2. Principal Place of Business 2a. Mailing Address					·	4. FEI Number			plied For
1]	The same of the sa		Suite Apt #, etc			13-6097905			t Applicable
Suite, Apt.	#, etc.	,	Suite: Apr. #, etc.			6. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat	e	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip I	Country 25	Zip 29	30 Cour	ntry			Yes [□ No	199.032,
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New F	logistered	Agent	
CT CORPORATION SYSTEM				81	Name				
1200 S. PINE ISLAND ROAD PLANTATION FL 33324			į	62	Street Addre	odress (P.O. Box Number is Not Acceptable)			
				83					
			Ţ	84	City		FL	85 Zip (Code
agent i a SIGNATURE	m tamiliar with, and accept the ob					oration submits this statement for the ion's board of directors. I hereby acc ad when reinstating)	DATE		
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
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AME	FRIEDMAN, J. ROGER 425 PARK AVENUE			1.2 NAME 1.3 SYREET ADDRESS					
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NAME CIBELLA ADOBLOG	MILLS, DANIEL J. 425 PARK AVENUE		5.2 NA		ADDRESS				
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6.2 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY ST-ZIE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14. If 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 or supplemental annual report as 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 then 1990, or on an interchment with an address. 212-756-5000

FILED

May 14 1997 8:00am

Secretary of State

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