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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

FILED Aug 07 1997 8:00am Secretary of State

TRACE FOAM COMPANY, INC.										1 1881 1881 1988 ANG ANG 1881 1881 1881 1881 1881 1881 1881 18	a (184 B)B4) B(idi: Albii Albii didi	II G IĐIJ (Đ ĐI
Principal Place of Business Mailing Address										ı idaşıyası tası tilin dilili tübti böli	8 1181 G1811 B1	.BIL BEBS BIBIN BIBI	
375 PARK AVENUE C/O M SCHWARTZBARD & 11TH FLOOR 354 EISENHOWER PKWY NEW YORK NY 10152 LIVINGSTON NJ 07039 US US							ASSOC.			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a, Date of Last Report			
										12/17/1991	•	03/21/1996	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Principal Pi	al Place of Business			28. Mailing Address				4, FEI Number		Apı	plied For	
21	Sulto Ant	ulte, Apt. #, etc.			Suite, Apt. #, etc.				22-3065375		\$8.75 A	t Applicable	
22	Suite, Apt.	Suite, Apr. #, etc.			27				5. Certificate of Status Desired		Fee Re		
	City & State	y & State			City & State				6. Election Campaign Financing		\$5.00	May Be	
23					28				Trust Fund Contribution		Added to		
24	Zip	Country Zip 30					Country 8. This corporation owes or has paid the Personal Property Tax due June 30.					ie current year Intangible Yes No	
[44]		9, Name and Address of Current Registered Agent						10. Name and Address of New Registered Ag					
THE PRENTICE-HALL CORPORATION SYSTEM INC.								Name					
1201 HAYS STREET							82 Street Addre			s (P.O. Box Number is Not Accep	table)	**************************************	
SUITE 105 TALLAHASSEE FL 32301													
I ALLANASSEE PL 32301							83						
							84	City			FI	L 85 Zip C	Code
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was aut agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida. 								-named	corpor	ation submits this statement for th	e purpose	of changing its	s registered
	agent. I a	gent, or both, in ith, and accopt	the state of FR	onda. Such change was s of, Section 607.0505, F	torida St	ed by alutes	r the cor _i s.	poration	is board of directors, i hereby ac	sept the at	pointment as i	registered	
SIGNATURÉ											DATE		
Signature, typed or printed name of registered agent and trie if applicable (NOTE F 12. OFF-ICERS AND DIRECTORS							ogistered Agent signature requi		e requied	ADDITIONS/CHANGES TO OF		ND DIRECTOR	S IN 12
⊢	LE	D COURTY DEFEN					HILE			•		C hange	Addition
NA	D ARA EICT		I, PETER A			1.2	NAME			. 3			
	reet address	% 452 FIFTH AVE. NEW YORK NY								AMIUS PARTWERS 40 WEST EW YORK NY 10019	577 Ji		
-	IY-ST-ZIP	VPID	ORK NI		DELETE	1.4 CHY-ST- 2.1 TITLE		1 - ZIP		MAN & PRESIDENT		Change	Addition
ı	MELSON, ROBERT H.].		22 NAME			HAR	me Coem		E Onlings	
	REET ADDRESS		RK AVENUE	ITH FL.	2.31		2.3 STREET ADDRESS 3		375	375 PARK AVENUE 11th Ft.			
cn	Y-ST-ZIP	NEW YORK NY								YORK, N.Y. 10152			
	LE	DEVP	7114N DADO	,	☐ DELETE	•	TITLE					Change	Addition
	ME		rman, Barr) RK avenue				NAME	1000000					
	REET ADDRESS		ORK NY					ADDRESS					
-	IY-ST-ZIP LE	VPS			DELETE		CITY-S TITLE	21 - 411'				Change	Addition
	ME		PHILIP N., JF		_		NAME					-	
\$T	reet address		RK AVENUE	ITH FL.		4.3	STREET	ADDRESS					
_	Y-ST-ZIP		ORK NY				CITY-S	1 - ZIP					
l	LE	AS KING 1	TAMBRA		☐ DELETE		11TLE					Change Change	Addition
l	ME Reet address		RK AVENUE	ITH FL.			NAME STREET	ADDRESS					
l	Y-ST-ZIP		ORK NY	·			SINEET CITY-S						
$\overline{}$	LE	AS			DELETÉ		HILE					Change	Addition
NA	ME		ON, JUDITH .			6.2	NAME						
ST	REET ADDRESS		RK AVENUE	ITH FL.		6.3	STREET	ADDRESS					
CI	Y-ST-ZIP	NEW Y	ORK NY		0 1 - ec	6.4	CITY-S	1 - 21P		Continu 110 07/2Vi). Florido Ctat			

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 rue 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 if changed, or on an attachment with an address.

Instruction of the D

17/24/97