FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Mar 19 1998 8:00am LLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1)P38413 ABI PROPERTY DALETH CORP. Principal Place of Business Mailing Address 420 LEXINGTON AVE 420 LEXINGTON AVE #2702 #2702 DO NOT WRITE IN THIS SPACE NEW YORK NY 10170 NEW YORK NY 10170 3. Date Incorporated or Qualified 04/20/1992 2. Principal Place of Business Applied For 2a. Mailing Address 21 26 13-3666324 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζm Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City Zip Code 85 11. Pursuant to the provisions of Strictions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 11 TITLE GOLDMAN, LLOYD NAME 1.2 NAME **2 LAMPLIGHT ROAD** STREET ADDRESS 1.3 STREET ADDRESS **WESTPORT CT** CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE TITLE SONNENFELDT, MICHAEL 22 NAME NAME STREET ADORESS 145 CENTRAL PARK WEST 2.3 STREET ADDRESS NEW YORK NY 10023 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE BEZAHLER, DON NAME 3 2 NAME **805 THIRD AVENUE** STREET ADDRESS 3 3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 City-St-ZiP DELETE Addition TITLE 5.1 TITLE NAME 5.2 NAME 5 3 STREET ADDRESS STREET ADDRESS

14. I horeby 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 suppliemental annual report is 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 of trigled empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental arrangement of the corporation or the receive of Block 12 or Block 13 if changed, or on an attachment

5.4 CITY-ST-ZIP

63 STREET ADDRESS 6.4 CITY - ST - ZIP

61 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY - ST - ZIP TIELE

STREET ADDRESS

NAME

Change

Addition

CR2E034