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FILED
May 14 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39010 (4)
1. Corporation Name
OGDEN CISCO, INC.



Principal Place of Business
TWO PENNSYLVANIA PLAZA
NEW YORK NY 10121

Mailing Address
TWO PENNSYLVANIA PLAZA
NEW YORK NY 10121

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24 25 29 30
9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM
1201 HAYES ST
STE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

3. Date Incorporated or Qualified

05/28/1992

3a. Date of Last Report

05/01/1996

4. FEI Number

13-3670141

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

11. Pursuant to the provisions of Sections 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ABLON, R. RICHARD DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
%TWO PENNSYLVANIA PLAZA
NEW YORK NY

TITLE VS ALLEN, PETER DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
%TWO PENNSYLVANIA PLAZA
NEW YORK NY

TITLE VTD DIGIA, ROBERT M. DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
%TWO PENNSYLVANIA PLAZA
NEW YORK NY

TITLE AS J.L. EFFINGER DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
2 PENN PLAZA
NEW YORK NY

TITLE V MUNROE, WALTER DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
%TWO PENNSYLVANIA PLAZA
NEW YORK NY

TITLE VAS PALMER, ISAAC DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
%TWO PENNSYLVANIA PLAZA
NEW YORK NY

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 oath; that I am an officer or director of the corporation; that 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 or on an attachment with an address.

SIGNATURE: J.L. EFFINGER ASST SECT

4/25/97 (212) 868-4331

CR2E034 (9/96)