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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P39103

(7)

DEUTSCHE MORGAN GRENFELL INC.

Original Place of Dusiness

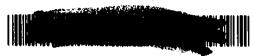
Mailing Address

FILED

Apr 23 1998 8:00am

Secretary of State

 ω



rinicipal riace of business (vi		Mailing Address				Section 1	
31 WEST 52ND STREET NEW YORK NY 10019		31 WEST 52ND STREET NEW YORK NY 10019			DO NOT WRITE IN THIS SI	PACE.	
						ACE	
					3. Date Incorporated or Qualified		
A. 6 ()		T =			06/02/1992		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Ap	plied For
21		26			13-2730828	No	t Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	
22		27			of Continuate of Status Bosines	Fee Re	quired
City & State		City & State			6. Election Campaign Financing	\$5.00	May Be
23	28				Trust Fund Contribution	Added t	o Fees
Zip	Country	Zip	Country	'	This corporation owes or has paid the current year Intangible		angible
24	25		30		Personal Property Tax due June 30. Yes No		
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered A	gent	
THE	PRENTICE-HALL CORPORATION	N SYSTEM, INC.	81	Name			j
110 N. MAGNOLIA STREET			82	82 Street Address (P.O. Box Number is Not Acceptable)			
TALLAHASSEE FL 32301			") Ollock 7	Address (1.0. Box Humber is Not Accoptable)		
.,,			83			·	
						, , ,	
			84	City	FL	85 Zip (Code
44 Diverset to	the provisions of Soctions 607 0503	and 607 1509 Elorida Statuto	s the above	named		phanaina it	a registered
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 egent, 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.	Signature, typed or printed name of registered agen OFFICERS AND		13.	ent signature	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTOR	C (N. 12
TITLE	MDS	DINECTORS	1,1 TITLE			Change	Addition
	* · · · · ·					AJ Change	L Addition
NAME	LYNCH, ROBERT H	^	1.2 NAME		McClelland, W. Carter		1
STREET ADDRESS	1301 AVENUE OF AMERICAN	>	1.3 STREET	ADDRESS	31 West 52nd Street		.
CITY-ST-ZIP	NEW YORK NY		1.4 CITY - S	T-ZIP	New York, NY 10019		
TITLE	D	☐ DELETE	21 TITLE		D	Change	Addition
NAME	MCCLELLAND, CARTER W		2.2 NAME		Allardice, Robert B. III		
STREET ADDRESS	81 West 52ND Street		2.3 STREET	ADDRESS	31 West 52nd Street		
CITY-ST-ZIP	NEW YORK NY 10019		2.4 CITY-	ST-ZIP	New York, NY 10019		ł
TITLE	D	K DELETE	3.1 TITLE			Change	X Addition
NAME	MEEHAN, JOHN J		3.2 NAME		Kvalheim, Grant		ĺ
STREET ADDRESS	31 WEST 52ND STREET		3.3 STREET	ADDRESS	31 West 52nd Street		
CITY-ST-ZIP	NEW YORK NY 10019		3.4. CITY-		New York, NY 10019		j
TITLE	D	DELETE	4.1 TITLE	u - E-11		Change	X Addition
NAME	MACMILLAN-SCOTT, JAMES	₩	4. 2 NAME	ľ	Wang, Joan W.		
STREET ADDRESS	31 WEST 52ND ST		4. 2 NAME	AUDBEGG	31 West 52nd Street		
1	NEW YORK NY						
CITY-ST-ZIP TITLE	AS	™ DELETE	4.4 CITY-S 5.1 TITLE	1 - Z#*	New York, NY	Change	Addition
	* 1.5				40000249941	-A viange	ריין אטטינוטנו (
NAME	HOLDMAN, ELAINE A		5.2 NAME			7	1
STREET ADDRESS	254-73RD STREET			ADDRESS	***158, 75		}
CITY-ST-ZIP	BROOKLYN NY 11209		5.4 CITY - S	T-ZIP			
TITLE	D	★ DELETE	6.1 TITLE		l	Change	☐ Addition
NAME }	BERND-ALBRECHT VON MATA	ZAN	6.2 NAME			P4_	
STREET ADDRESS	TAUNUSALAGE 12		6.3 STREET	ADDRESS		1 1	113
CITY+ST-ZIP	FRANKFURT AM		6.4 CITY - S	ST-ZIP			1.13

14. I 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joan W. Wang, Assistant Secretary

(212) 469 7341

Daytine Phone 4 0004097