| FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 | | | | | | | | | |
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| | | RPORATION JAL REPORT | Sand Mortham A M9 Actatary of State | | | | (0.5%)+2 KH0:21 | | |
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| | 1998 P39103 (7) | | | | | | Talk Marin. F | TČĖĖĀA | |
| 1. | | | | | | | · | | |
| | DEUTSCHE MORGAN GRENFELL INC. DEUTSCHE BANK SEWRITIE | | | | | • | | adan dagan daran dada dar | in Bila 1861 |
| | | | | | | | | 14 (1 4 1 1) | |
| Principal Place of Business Mailing Address 31 WEST \$2ND STREET 31 WEST 52ND STREET | | | | | | | | | |
| NEW YORK NY 10019 NEW YORK NY 10019 | | | | | | | DO NOT WRITE IN | THIS SPACE | |
| | | | | | | | 3. Date Incorporated or Qualified 06/02/1992 | | |
| | Principal P | lace of Business | 2a. Mailing Address | ¬ · | | | 4. FEI Number | | pplied For |
| 21 | Suite. Apt. | #, etc | Suite, Apt. #, etc. | | 13-2730828 | | ot Applicable Additional | | |
| 22 | City & State | 9 | City & State | 27] City & State | | Certificate of Status Desired Election Campaign Financing | - ree He | equired | |
| 23 | | 28 | | | · · · · · · · · · · · · · · · · · · · | | , | | May Be to Fees |
| 24 | Zip | Country 25 | Zip 29 | Country 30 | y | | This corporation owes or has paid the Personal Property Tax due June 30 | | tangible] No |
| | TU | 9. Name and Address of Current | | 81 | Name | | 10. Name and Address of New Regis | tered Agent | |
| THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 N. MAGNOLIA STREET | | | | | | Addre | ss (P.O. Box Number is Not Acceptable) | | |
| TALLAHASSEE FL 32301 | | | | 83 | | | | | |
| | | | | | -06/14/9301015006 4 City ************************************ | | | | |
| 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes | | | | | 1 | corno | | | te tegislared |
| | office or re agent. 1 a | egistered agent, or both, in the State of militar with, and accept the obligations. | of Florida. Such change was autions of, Section 607.0505, Flor | ithorized b ida Statute | y the corp | oratio | ration submits this statement for the purposis board of directors. I hereby accept the | ne appointment as | registered |
| SI | GNATURE | Signature Typed or printed name of registered agent | and title it applicable [NOTE | Registered Ag | eni signature | required | d when reinstaling) | DATÉ | |
| 12 | | OFFICERS AND DIRECTORS | | 13. | | | ADDITIONS/CHANGES TO OFFICER C.P. | S AND DIRECTOR | RS IN 12 |
| TiT! | LINIOU DODENT II | | רי סברביב | | | | Clelland, W. Carter | (AL) Change | Magnici: |
| | REET ADDRESS | 1301 AVENUE OF AMERICANS | \$ | 13 STREET ADDRESS 3 | | 31 | West 52nd Street | | |
| ÇIT TIT | Y-ST-ZIP LÉ | NEW YORK NY D | DELETE | 1.4 CITY - 1 2 1 TITLE | ST - ZIP | Ne D | w York, NY 10019 | Change | X Addition |
| NA | - 1 | MCCLELLAND, CARTER W | | • ' | | 1 | lardice, Robert B. II | I | |
| 1 | EET ADDRESS 31 WEST 52ND STREET V-ST-ZIP NEW YORK NY 10019 | | | | | | West 52nd Street w York, NY 10019 | | |
| TI? | LE | D | K DELETE | M DELETE 31 TITLE | | D | | Change | X Addition |
| NA. Str | MEEHAN, JOHN J REET ADDRESS 31 WEST 52ND STREET | | 3 2 NAME 3 3 STREET ADDRES | | (| | alheim, Grant West 52nd Street | | |
| CiT | ry - ST - ZIP | NEW YORK NY 10019 | 5-1 oc 575 | 34 City- | St - ZIP | | w York, NY 10019 | | X Addition |
| Tit- | i | D MacMillan-Scott, James | K] DELETE | 4 1 TITLE 4 2 NAME | | As Wa | ng, Joan W. | Change | PO MIGHION |
| STF | REET ADDRESS | 31 WEST 52ND ST | 43 STREET ADDRESS | | 31 | West 52nd Street | | | |
| CIT | LE LE | NEW YORK NY AS | ₹] ÖELETE | \$ 1 TITLE | | Ne | w York, NY | Change | Addition |
| NA | - 1 | HOLDMAN, ELAINE A | | 52 NAME | | | | | |
| ł | REET ADORESS TY-ST-ZIP | 254-73RD STREET BROOKLYN NY 11209 | | 53 STREE 54 CITY - | T ADDRESS ST-ZIP | | | | |
| TIT | Ίξ | D | DELETE | 61 TITLE | | | | Change | Addit or |
| NA Str | ME REET ADDRESS | BERND-ALBRECHT VON MATZ TAUNUSALAGE 12 | CAN | 6.2 NAME 6.3 STREE | 1 ADORESS | | | | . 10 M2 |
| ; : 1.1 | ry St Za | FRANKFURT AM | h thui libra dans act a sile to | 64 <u>C</u> ITY - 1 | St-ZIP | d :5 6 | ection 119 07(3)(i), Florida Statutes Hurt | thus paster that the | 18/7 |
| 14 | indicatéd officer or | on this annual report or supplemental director of the corporation or the recei | annual report is true and accu ver or trusted empowered to e | ine exemp rate and th xecute this | nat my sig report as | nature requir | lection (1907(3)(1). Florida Statutes, I furt e shall have the same legal effect as if ma red by Chapter 607, Florida Statiltes, and | and certify that the ade under oath, the dithat my hame ap | at I aman pears |
| Biology 13 of changed, og on an attachment with an address Joan W. Wang, Assistant Secretary (212) 469 7341 | | | | | | | | | |
| SIGNATURE: SIGNATURE: SIGNATURE SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR O004987 | | | | | | | | | |