

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

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P39918 (8)  
1. Corporation Name  
MERIKUS INC.

Principal Place of Business  
% WEISSBARTH, ALTMAN & MICHAELSON  
156 WEST 56TH STREET  
NEW YORK NY 10019

Mailing Address  
% WEISSBARTH, ALTMAN & MICHAELSON  
156 WEST 56TH STREET  
NEW YORK NY 10019

FILED

98 JUL 24 AM 10:34

SECRETARY OF STATE

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 % BLOOM HOCHEBERG & CO., P.C. Suite, Apt. #, etc. 22 450 SEVENTH AVENUE City & State 23 NEW YORK, NEW YORK Zip 24 10123		2a. Mailing Address 26 % BLOOM HOCHEBERG & CO., P.C. Suite, Apt. #, etc. 27 450 SEVENTH AVENUE City & State 28 NEW YORK, NEW YORK Zip 29 10123		3. Date Incorporated or Qualified 08/04/1992	
4. FEI Number 13-3553874		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		10. Name and Address of New Registered Agent			
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OPT MICHAELSON, ROBERT T. 156 WEST 56TH STREET NEW YORK NY <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BAKER, EDWIN H. 250 PARK AVENUE NEW YORK NY <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	PTSD BAKER, EDWIN H. 250 PARK AVENUE NEW YORK, NY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GANG, MARTIN 156 WEST 56TH STREET NEW YORK NY <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 100002601491--9 -07/29/98--01055--007 *****150.00 *****150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS ROSS, CORA D 250 PARK AVE NEW YORK NY <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 OF REGISTERED AGENT

TS-98AR two pages  
7/28  
6/22/98 212-351-4710

**BLOOM HOCHBERG & CO., P. C.**  
CERTIFIED PUBLIC ACCOUNTANTS

450 SEVENTH AVENUE  
NEW YORK, N.Y. 10123

TELEPHONE  
(212) 244-2112  
FAX  
(212) 629-5058

Division of Corporations  
Annual Report Section  
P.O. Box 6327  
Tallahassee, Florida 32314

July 13, 1998

Re: Merikus Inc.  
Ref. Number: P39918

Dear Sir or Madam:

We previously wrote to you explaining the late filing of the Annual Report and requested that the taxpayer not be penalized for the late filing. You rejected our request and sent back the reports for additional payment. I want to clarify and further explain the reason for the late filing and request an abatement of the late filing fee.

The address on the Annual Report is that of the taxpayer's former accountants. In November, 1997, the taxpayer decided to change accounting firms and engaged our firm as their new accountants. Unfortunately, the transition was not smooth as the former accountants were not cooperative in remitting information and documents to us. When we began preparing the corporate tax returns for the taxpayer in June, 1998, we inquired about the filing of the Annual Reports which apparently were being held by the former accountants. We finally received the Reports and immediately completed them and filed them with the appropriate fee. Since we, as the representative of the taxpayer, did not receive this form in a timely manner, it would be unfair to the taxpayer to penalize them for circumstances beyond their control. The taxpayer has always complied with their filing requirements, and it would cause a hardship to penalize them especially considering these special circumstances. Therefore, we respectfully request that you abate the late filing fee.

Thank you for your cooperation.

Very truly yours,  
Bloom Hochberg & Co., P.C.

Michael Miller, CPA