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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1996

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P93000003908
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KADMON GENESIS PUBLISHING CORPORATION

612 OLEANDER DR 612 OLEANDER DR HALLANDALE FL 33009 HALLANDALE FL 33009 3. Date Incorporated or Qualified 3a. Date of Last Report 01/19/1993 07/03/1995 2. Principal Place of Business 4. f El Number 2a, Mailing Address Applied For 65-0402447 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Z_{10} Country Country This corporation has liability for intangible tax under si 199 032 Yes No 24 25 30 Florida Statutes 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent В1 PERLOW, JEFFREY M 82 Street Address (P.O. Box Number is Not Acceptable) 1820 E HALLANDALE BEACH BLVD HALLANDALE FL 33009 83 84 City Zip Code 85 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE the fit. Blow letter! Adent Saturative regioned when nemistatineq DATE Signature, type a corporated datase of required taxant and the it accordance CR2E034 (12/95) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. [] DELETE TITLE Addition 1 1 THE Change MILSTEIN, JOSEPH NAME 1.2 NAME 66 CHAI TIBE APT 11 STREET ADDRESS 13 STREET ADDRESS HARNOF JERUSALEM ISRAEL CITY - ST - ZIP 4 CITY-ST-ZIP DELETE TITLE 2 1 THE Change ☐ Addition DAIAGI N, ANNETTE 2.2 NAME **612 OLEANDER DR** STREET ADDRESS 2.3 STREET ADDRESS HALLANDALE FL 33009 CITY - ST - ZIP 2.4 City - \$1 - ZiP DELETE TITLE 3 1 THILE Change Addition KIRSCHENBAUM, MARTIN NAME 3.2 NAME 580 5TH AVE STREET ADORESS 3.3 STREET ADDRESS **NEW YORK NY** 3 4 CITY - ST - ZIP CITY - ST - ZIP TITLE DELETE 4 1 7 TEE Change ☐ Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - 71P DELETE Change TITLE 5 1 TITLE Addition 5.2 NAME NAME STREET ADDRESS 5 3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under

ge empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.4 CHY-ST-ZIP 14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further

6 1 11111

6.2 NAME

SIGNATURE:

certify that the information indicated on this annual oath; that I am an officer or director of the correct

appears in Block 12 or Block 13 if changed

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

and the receiver or trust

Claytone Phyne #

Change

Add-tion