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. CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sccretary of State

DIVISION OF CORPORATIONS

PROFIT Sandra B. Morthani

I. Corporation Na		0035189 (8	3)					
•	BRA CIRCLE, INC.							
Principal Place of	Business	Mailing Address			 	 	(U)	
80 SW 8 ST SUITE 2803		BO SW 8 ST SUITE 2803						
MIAMI FL 331	130	MIAMI FL 33130		3. Date Incorporate 05/13/19		3a. Date o	f Last Rep 5/01/199	
2. Principal Place	e of Business	2a. Mailing Address		4. FEI Number	2000		<u> </u>	plied For
1		26		11-316	1930		\$8.75 /	ot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Sta	atus Desired [Fee Re	
City & State		City & State		6. Election Campa Trust Fund Cont]	\$5.00 Added	•
3 Zip	Country	28 Zu	Country	8. This corporation	has liability for into	angible tax		
4	25	29 Registered Agent	[30]	Florida Statutes 10. Name and Add			gent	
	9. Name and Address of Current	negistereo Agent	8'i Name			· · · · · · · · · · · · · · · · · · ·		
MCCALL	GHAN, WILLIAM P		82 Street A	ddress (P.O. Box Number	is Not Acceptable)			
80 SW	•					<u></u>		···
SUITE 2			83					
	L 33130		81 City	.,,		FL	85 Zip	Code
	the provisions of Sections 607,0502	LCOZ 4500 Finish State	too the phone paged cor	poration submits this state	ement for the purpo	nse of chan	l <u>l</u> iging its re	gistered office
or registered familiar with	a agent, or both, in the state of Florid, , and accept the obligations of, Section			scard of directors. Thereby				
familiar with SIGNATURE _ s	a agent, or born, in the State of Fiolds, , and accept the obligations of, Section gnature, highest or production as at regulated section. OFFICERS AND	a 5001 Orange was accura- on 607.0505, Florida Statute		prodiktor on tatop	IANGES TO OFFIC	DATE ERS AND I	DIRECTOR	RS IN 12
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I do hereby certify that the integration supplied with this hing is voluntarily furnished and does not quarry for the exemption stated in Section 1.19.07(3)(x), Fornd Statutes, Flurther 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 empower of to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed or only a statishment with an address.

SIGNATURE:

SCHATUR AND TYPED OF PRINTED LAME OF SIGNING OFFICER OR DIRECTOR Gredory D. Liegey, President

4/22/96 (516) 745-2884 Daylor & Plane 4

BB 787

ALHAMBRA CIRCLE, INC.

1996 CORPORATION ANNUAL REPORT

Item 12:

NAME

ROSEANN WIENCKO

TITLE

v

STREET ADDRESS CITY-ST-ZIP

EAB PLAZA-EAST TOWER, 13th FLOOR

UNIONDALE, NY 11556-0123

NAME

DANIEL P. GRIPPO

TITLE

S

STREET ADDRESS CITY-ST-ZIP EAB PLAZA-EAST TOWER, 15th FLOOR

UNIONDALE, NY 11556-0125

NAME

ROBERT S. MONHEIT

TITLE

AS

STREET ADDRESS CITY-ST-ZIP

EAB PLAZA-EAST TOWER, 15th FLOOR

UNIONDALE, NY 11556-0125

NAME

SUSAN N. REESE

TITLE

AS

STREET ADDRESS CITY-ST-ZIP

EAB PLAZA-EAST TOWER, 15th FLOOR

UNIONDALE, NY 11556-0125

NAME TITLE THOMAS W. ALEXANDERSON

STREET ADDRESS

T EAB PLAZA-EAST TOWER, 13th FLOOR

CITY-ST-ZIP UNIONDALE, NY 11556-0123

AS = Assistant Secretary

S = Secretary T = Treasurer

V = Vice President