FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 PM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000044715 (9)**

1. Corporation Name
DBH HOLDINGS, INC.

Principal Place of Business	Mailing Address
100 FAIRWAY DRIVE DEERFIELD BEACH FL 33441 US	780 THIRD AVENUE NEW YORK NY 10017

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **06/24/1993**
3a. Date of Last Report: **06/14/1994**

2. Principal Place of Business — 21:
Suite, Apt. #, etc. — 22:
City & State — 23:
Zip — 24: Country — 25:

2a. Mailing Address — 26:
Suite, Apt. #, etc. — 27:
City & State — 28:
Zip — 29: Country — 30:

4. FEI Number: **13-3727322** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE		☐ Change ☐ Addition
NAME	GRIFFIN, MERV	1.2 NAME		
STREET ADDRESS	780 THIRD AVENUE	1.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY 10017	1.4 CITY-ST-ZIP		
TITLE	P	2.1 TITLE		☐ Change ☐ Addition
NAME	GALLAGHER, THOMAS	2.2 NAME		
STREET ADDRESS	241 CENTRAL DRIVE	2.3 STREET ADDRESS		
CITY-ST-ZIP	BRIARCLIFF MANOR NY	2.4 CITY-ST-ZIP		
TITLE	VPT	3.1 TITLE		☐ Change ☐ Addition
NAME	COHEN, LAWRENCE	3.2 NAME		
STREET ADDRESS	140 POPLAR DRIVE	3.3 STREET ADDRESS		
CITY-ST-ZIP	EAST HILLS NY	3.4 CITY-ST-ZIP		
TITLE	VP	4.1 TITLE		☐ Change ☐ Addition
NAME	EYRE, MICHAEL	4.2 NAME		
STREET ADDRESS	5580 N. CEDARHAVEN DRIVE	4.3 STREET ADDRESS		
CITY-ST-ZIP	AGOURA HILLS CA	4.4 CITY-ST-ZIP	AGOURA HILLS, CA	
TITLE	VP	5.1 TITLE		☐ Change ☐ Addition
NAME	DEVERIEH, KEVIN	5.2 NAME		
STREET ADDRESS	11201 CANTON DRIVE	5.3 STREET ADDRESS		
CITY-ST-ZIP	STUDIO CITY CA	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Glenn Rudolph 4/25/95 212-753-1830
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000064 FP