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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	·=	00053893 (2)						
Principal Plac	e of Business	Mailing Address			A HEALISAGE AND HOUSE CHILD BORRY DOUGH A	AH ODIOLOFIU I	iadi iaiad ik	TOO HAT HODE
315 W 57 STREET 331 W 57TH STR		331 W 57TH STREET	1					
#14-D #343		#343						
NEW YORK NY 10019			NEW YORK NY 33146-1216		DO NOT WRITE IN THIS SPACE			
US		US			3. Date Incorporated or Qualified			
9 Principal D	None of Puninger	Loc Mallian Address			08/03/1993			
	Place of Business	2a. Mailing Address			4. FEI Number		 	pplied For
		Suite, Apt. #, etc.			65-0434351			ot Applicable
22 27		 	•		5. Certificate of Status Desired	X	\$8.75 / Fee Re	Additional
		City & State	/ & State		e Ctastian Compaign Financia			
23		28			6. Election Campaign Financing Trust Fund Contribution	П	\$5.00 Added t	
Zip	Country	Zip	Country		8. This corporation owes or has pa	aid the currer		
24	25 29 /00 /9 30			Personal Property Tax due June 30. Yes No				
	9. Name and Address of Curr	ent Registered Agent	81		10. Name and Address of New Re	gistered Ag		
AMERICAN INFORMATION SERVICES, INC.				Name				
1 S.E. 3RD AVE.			82	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)		
28TH FLOOR					<u>'</u>			
MV	AMI FL 33131		83					
			84	City			85 Zip (Code
				•		⊢LI		
SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obta Signature typed or proted ourse of registered a		uthorized by the rida Statutes. Registered Agent		oration submits this statement for the points board of directors. It hereby acce	pt the appoin	Iment as	registered
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		RECTOR	S IN 12
TITLE	DP	DELETE	1.1 TITLE				Change	Addition
NAME	STEINHARDT, CHARLES		1.2 NAME					
STREET ADDRESS	315 WEST 57TH STREET #	14 D	1.3 STREET AD	ORESS				
CITY-ST-ZIP	NEW YORK NY		1.4 CITY-ST-	ZIP				
TITLE	TSDV	☐ DELET E	2.1 TITLE				Change	Addition
NAME	S TEINHARDT, HELEN D		2.2 NAME					
STREET ADDRESS	315 WEST 57TH STREET #14D		2.3 STREET ADDRESS			7		
CITY-ST-ZIP	NEW YORK NY		2.4 CITY-ST-	ZIP				
TITLE	DELETE		3.1 TITLE				Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET AD	DRESS				
CITY-ST-ZIP	VI		3.4. CITY - ST -	ZIP				
TITLE	L] DEFELE		4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET AD	DRESS				
CITY-ST-ZIP			4.4 CITY - ST - Z	ZIP		<u> </u>		
TITLE	DELETE		5.1 TITLE			نا	Change	Addition
NAME			5.2 NAME					j
STREET ADDRESS			5.3 STREET AD					Ì
CITY-ST-ZIP		T Acteve	5.4 CITY - ST - Z	TIP				
TITLE	•	☐ DELET E	6.1 TITLE			Ш	Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET AD	DRESS				

CITY-ST-ZIP

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 attagrament with an address.

FILED

Mar 16 1998 8:00am

Secretary of State