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

# FILED
# May 15 1998 8:00am
# Secretary of State

PROFIT CORPORATION ANNUAL REPORT

**1998**

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

DOCUMENT # **P93000077878 (5)**

1. Corporation Name
**NEW PORT RICHEY FLORIDA BLIMPEX CORP.**

| Principal Place of Business | Mailing Address |
|---|---|
| % UNITED CORPORATE SERVICES INC<br>801 NE 167TH ST SUITE 300<br>NORTH MIAMI BEACH FL 33162 | P.O. BOX 888287<br>DUNWOODY GA 30356-0287<br>US |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/10/1993

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 | 26 1775 The Exchange |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 #600 |
| City & State 23 | City & State 28 Atlanta, Georgia |
| Zip 24 / Country 25 | Zip 29 30339 / Country 30 USA |

4. FEI Number: 58-2080662 ☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

| 9. Name and Address of Current Registered Agent | 10. Name and Address of New Registered Agent |
|---|---|
| UNITED CORPORATE SERVICES INC<br>801 NE 167TH ST<br>SUITE 300<br>NORTH MIAMI BEACH FL 33162 | 81 Name<br>82 Street Address (P.O. Box Number is Not Acceptable)<br>83<br>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 | DP | ☐ DELETE | 1.1 TITLE | VD | ☒ Change ☐ Addition |
| NAME | SIEGEL, DAVID L | | 1.2 NAME | DAVID L. SIEGEL | |
| STREET ADDRESS | 740 BROADWAY | | 1.3 STREET ADDRESS | 740 BROADWAY - 12th FLOOR | |
| CITY-ST-ZIP | NEW YORK NY | | 1.4 CITY-ST-ZIP | NEW YORK, NY 10003 | |
| TITLE | P | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | POMPEO, PATRICK | | 2.2 NAME | | |
| STREET ADDRESS | 740 BROADWAY | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | NEW YORK NY | | 2.4 CITY-ST-ZIP | | |
| TITLE | VPSD | ☐ DELETE | 3.1 TITLE | VSD | ☒ Change ☐ Addition |
| NAME | LEANESS, CHARLES | | 3.2 NAME | CHARLES G. LEANESS | |
| STREET ADDRESS | 740 BROADWAY | | 3.3 STREET ADDRESS | 740 BROADWAY - 12th FLOOR | |
| CITY-ST-ZIP | NEW YORK NY | | 3.4 CITY-ST-ZIP | NEW YORK, NY 10003 | |
| TITLE | TV | ☒ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | SITKOFF, ROBERT | | 4.2 NAME | | |
| STREET ADDRESS | 1775 THE EXCHANGE | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | ATLANTA GA | | 4.4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 5.1 TITLE | T | ☐ Change ☒ Addition |
| NAME | | | 5.2 NAME | JOSEPH MORGAN | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | 740 BROADWAY - 12th FLOOR | |
| CITY-ST-ZIP | | | 5.4 CITY-ST-ZIP | NEW YORK, NY 10003 | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 6.4 CITY-ST-ZIP | | |

CR2E034 (10/97)

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: _____ DAVID L. SIEGEL 5/08/98 (212)473-5900