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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000030453 (2)

BEACON INDUSTRIAL/TFI, INC.

Principal Place of Business % MR. BARRY L. BLOOM

Mailing Address

FILED May 13 1998 8:00am Secretary of State



% MR. BARRY L. BLOOM 887 MADISON AVENUE. BTH FLOOR 667 MADISON AVENUE, 8TH FLOOR DO NOT WRITE IN THIS SPACE NEW YORK NY 10021 NEW YORK NY 10021 3. Date Incorporated or Qualified 04/21/1994 2. Principal Place of Business 2a. Mading Address 4. FEI Number Applied For Not Applicable 26 58-2119681 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 685 MADISON AVE 655 NADISON AVE Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Ζīρ Country Zin Country 8. This corporation owes or has paid the current year Intangible Yes Yes ☐ No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GRAGG, K. LAWRENCE 200 S. BISCAYNE BLVD. Street Address (P.O. Box Number is Not Acceptable) **SUITE 4900** 83 **MIAMI FL 33131** 84 City 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 Horida. 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. Signature, typical or printed manie of registere tractent and title diapple, alice (NOT) Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition DELETE Change TITLE 1.1 TITLE TISCH, THOMAS J NAME 1.2 NAME 667 MADISON AVENUE, 8TH FLOOR 1.3 STREET ADDRESS STREET ADDRESS NEW YORK NY 10021 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition VD 2.1 THILE TITLE TISCH, JONATHON M NAME 2.2 NAME **667 MADISON AVENUE, 8TH FLOOR** STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK NY 10021** CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE Change 3.1 TITLE TITLE STEINBERG, THOMAS M 3.2 NAME NAME 667 MADISON AVENUE, 8TH FLOOR 3.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10021** CITY-ST-ZIP 3.4. CITY - ST - ZIP Change Addition DELETE 4.1 1ffLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZiP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 exemption of the corporation or the exemption of the 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 utilize timent with an address.