FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Mar 06 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra Er: Mortfish 1 ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P94000079942 (6) FORUM HOLDINGS, INC. Mailing Address Principal Place of Business 1601 FORUM PLACE 1601 FORUM PLACE **SUITE 1101 SUITE 1101** DO NOT WRITE IN THIS SPACE WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 3. Date Incorporated or Qualified 10/31/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0534134 Not Applicable 21 Suite, Apt. #. etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zıp Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes 24 29 30 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name GLICKMAN, GARRY M 1601 FORUM PLACE Street Address (P.O. Box Number is Not Acceptable) **SUITE 1101** 83 WEST PALM BEACH FL 33401 84 Zip Code City 85 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 nt and the diapply blo (NOTE Fingistored Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change 11 THE TITLE **WOLGIN, JACQUELINE** 1.2 NAME NAME 1900 RITTENHOUSE SQUARE APT 14B 1.3 STREET ADDRESS STREET ADDRESS PHILADELPHIA PE 1.4 CRY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE TITLE 21 TITLE NAME 22 NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP Change DELLITE 3.1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP Change TITLE DELETE 4.1 TITLE NAME 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP 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 suppliemental 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.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

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