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

PROFIT CORPORATION ANNUAL REPORT



ELOBIDA DEPARTMENT DE STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Change

Addition

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P95000014919 (1)

RBL EQUITY, INC.

Principal Place of Business Mailing Address 20 COMMUNITY PLACE 20 COMMUNITY PLACE MORRISTOWN NJ 07980 MORRISTOWN NJ 07960-7501 3. Date Incorporated or Qualified 3a. Date of Last Report 02/22/1995 04/08/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 22-3352868 21 26 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional V 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zιο 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 C T CORPORATION SYSTEM 1200 S PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 83 Zip Code City 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 registored 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** (NOTE Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and tille if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE DPST Change Addition ROBBINS, ERIC NAME 1.2 NAME 20 COMMUNITY PLACE STREET ADDRESS 1.3 STREET ADDRESS **MORRISTOWN NJ 07960** CITY-ST-ZIP 1.4 CITY-\$1-2IP DELETE Change Addition TITLE 21 THE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. C:TY-S1-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1701LE

14. I do 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 eath; that I am an officer or director of the corporation or the receiver or visited empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an authorized with an address.

SIGNATURE

5.2 NAME

6.1 1ITLE

6.2 NAME

DELFTE

5.3 STREET ADDRESS

63 STREET ADDRESS

5.4 CITY - \$1 - Z(P)

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP