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

DOCUMENT # P95000016270 (7)

THE ERDOS CORPORATION

Principal Place of Business

410 W. 53RD STREET #303

Mailing Address

410 W. 53RD STREET #303 NEW YORK FL 10019

FILED May 04 1998 8:00am Secretary of State



NEW YORK FL 10019 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/27/1995 2. Principal Place of Business 2a. Mailing Address Applied For 65-0558072 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 29 30 ✓ Yes 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ALLBRITTEN, CAROLE J ALLBRITTEN & SUMMERS, INC. Street Address (P.O. Box Number is Not Acceptable) 82 4730 S. HEMINGWAY CIRCLE 83 MARGATE FL 33063 City Zip Code 11. Pursuant to the provisions of Scotions 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. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent and to elit applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE ERDOS, DIANA G NAME 1.2 NAME 410 W. 53RD STREET, #303 STREET ADDRESS 1.3 STREET ADDRESS NEW YORK FL 10019 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME -STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 JITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP TITLE DELETE Change Addition 4 1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change DELETE ☐ Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - 7IP 14. Thereby 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.

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au 122/00 (212)245 2841