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 # P95000076396 (7) 7832 OCEANSIDE CORP. Principal Place of Business Mailing Address C/O LOCKER GREENBERG & BRAININ, P.C. C/O LOCKER GREENBERG & BRAININ, P.C. **420 FIFTH AVENUE** 420 FIFTH AVENUE DO NOT WRITE IN THIS SPACE **NEW YORK NY 10018** NEW YORK NY 10018 3. Date Incorporated or Qualified 10/05/1995 2. Principal Place of Business 2a. Mailing Address Applied For 13-3928283 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional П 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zio Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ✓ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 City Zip Code 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 Horida. 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, typed or proted name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ☐ Change TITLE 1.1 TITLE ☐ Addition LOCKER, FREDERICK B NAME 1.2 NAME **420 FIFTH AVENUE** STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY 10018** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change TITLE 21 TITLE Addition CONSTON, HENRY NAME 2.2 NAME 90 PARK AVENUE STREET ADDRESS 23 STREET ADDRESS **NEW YORK NY 10016** CITY-ST-ZIP 2 4 CiTY-ST-ZIP DELETE Change TITLE Addition 3.1 TITLE HAEFELI, ERICH NAME 3.2 NAME FL-9496 BALZERS RD., PRINCIPALITY OF -STREET ADDRESS 3 3 STREET ADDRESS **LIECHTENSTEIN** City-St-ZiP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE Change Addition 61 TITLE NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS

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 oreover or trusten 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 or an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Queroux.

2-16-1998 - 217 461-5200

FILED

Mar 25 1998 8:00am

Secretary of State