## 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 # P96000103993 (7)

XFC LIQUIDATING (NEW YORK) CORP.

## FILED Apr 01 1998 8:00am Secretary of State

Principal Place of Business Mailing Address								<b>49100 HAIR FOLKE IN</b>	
10101 COLLINS AVE 10101 COLLINS AVE									
APT 8F APT 8F							DO NOT WRITE WATER		
BAL HARBOR FL 33154  BAL HARBOR FL 33154  US  US							DO NOT WRITE IN THIS SPACE		
••		00					3. Date Incorporated or Qualified 12/27/1996		
2. Principal Pi	lace of Business	2a. Ma	iling Address	<del></del>			4. FEI Number	I IAn	plied For
21		26					65-0933302	ļ <del></del>	t Applicable
Suite, Apt.	#, etc.		ite, Apt. #, etc.					\$8.75	
22			27				5. Certificate of Status Desired	Fee Re	quired
City & State	y & State				6. Election Campaign Financing	\$5.00	May Be		
23	<del></del>	28 Zip		· · · · ·			Trust Fund Contribution	Added t	o Fees
Zip	Country		— ·			8. This corporation owes or has paid the			
24	25 Name and Address	29 29 ss of Current Registere	d Anent	30]			Personal Property Tax due June 30.  10. Name and Address of New Registere		No
no	ESNER, JOSEPH S	Anii alii ila Biotolo	190111	<del></del>	81	Name	10. Mann and wantes of Heat Deligion	W WHOLK	
10101 COLINS AVE									
BF					82 Street Address (P.O. Box Number is Not Acceptable)				
	L HARBOR FL 33154			h	83			<del></del>	
					_				
					64	City	F	85 Zip C	Code
11. Pursuant t	to the provisions of Secti	ons 607.0502 and 607.1	508, Florida Statut	tes, the ab	ove	-named corpo	oration submits this statement for the purpose	of changing its	s registered
office or re	egi <b>ste</b> red agent, or both, m f <b>am</b> iliar with, and accr	, in the State of Florida. S But the obligations of Se	Such change was a ction 607 0505 Fil	authorized orida Stati	by des	the corporatio	on's board of directors. I hereby accept the a	appointment as i	registered
SIGNATURE		yn are eringanone en ee	5,10,7,001,10000,7,7	01100 01010		•			
	Signature, typed or pentud name	of registered agent and title if app	licable (NOT	E Registered	Ager	nt signeture required	d when reinstating) DAT(	=	
12.		FICERS AND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	DP 100ED		☐ DELETE	1.1 स्या	LE			L Change	Addition
NAME	DRESNER, JOSEPH			1.2 NA	ME				
STREET ADDRESS	10101 COLLINS A	VE #81		1.3 STR	EET A	ADDRESS			ļ
CITY-ST-ZIP	BAL HARBOR FL DST		05,555	1.4 CIT		- ZIP			
TITLE	DRESNER, MILTON	ıu	DELETE	2.1 TITL				Change	Addition
NAME OTOSSET A PODOSOO	10101 COLUNS A			2.2 NAM					
STREET ADDRESS	BAL HARBOR FL	YE WOI				ADDRESS			
CITY-ST-ZIP TITLE	GAL IVADOITIE		DELETE	2 4 CH		I - ZIP		Change	Addition
NAME				3.2 NAN					- Addition
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP				3.4. CIT					
TITLE			DELETE	4.1 TITL				Change	Addition
NAME				4. 2 NA	ΜE				_
STREET ADDRESS						ADDRESS			
CITY-ST-ZIP				4.4 CITY					
TITLE			DELETE	5.1 TITL	_			Change	Addition
NAME				5.2 NAN	Æ				
STREET ADDRESS				5.3 STR	EET A	ADDRESS			1
CITY-ST-ZIP				5.4 CITY	/- ST	- ZIP			
TITLE	···		DELETE	6.1 TITL	E			Change	☐ Addition
NAME				6.2 NAM	<b>AE</b>				
STREET ADDRESS				6.3 STR	EET A	uddress			ļ
CITY-ST-ZIP				6.4 CITY					
34 I hereby ca	ertify that the information	compliant with this filing.	done not qualify for	or the even	nnti	on stated in Ca	ection 110 07/3\(\text{i}\) Florida Statutos I further	partiful that the	intermetion

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 receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of cluringed, or on an attachment with an address.