

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90151 011 ***150.00

DOCUMENT # P97000107191

1. Entity Name

RAHA ASSOCIATES II, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

708 THIRD AVENUE

Suite, Apt. #, etc.

28th FLOOR

City & State

NEW YORK, NEW YORK

Zip

10017-4201

Country

USA

3. Mailing Address

708 THIRD AVENUE

Suite, Apt. #, etc.

28th FLOOR

City & State

NEW YORK, NEW YORK

Zip

10017-4201

Country

USA

4. FEI Number

58-2363738

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

GRAGG, K. LAWRENCE

Street Address (P.O. Box Number is Not Acceptable)

200 S. BISCAYNE BLVD.

SUITE 4900

City

MIAMI

FL

Zip Code

33131

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida.

SIGNATURE

Signature typed or printed of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)



January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing

Trust Fund Contribution:

\$5.00 May Be

Added to Fees



11. OFFICERS AND DIRECTORS

TITLE PRESIDENT

NAME CHARLES B. BENENSON

STREET ADDRESS 708 THIRD AVENUE, 28th FLOOR

CITY-ST-ZIP NEW YORK, NEW YORK 10017-4201

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE SECRETARY

NAME RICHARD KESSLER

STREET ADDRESS 708 THIRD AVENUE, 28th FLOOR

CITY-ST-ZIP NEW YORK, NEW YORK 10017-4201

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE TREASURER

NAME LLOYD STABINER

STREET ADDRESS 708 THIRD AVENUE

CITY-ST-ZIP NEW YORK, NEW YORK 10017-4201

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

13. 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 report or supplemental 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Charles B. Benenson CHARLES B. BENENSON

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/2002

Date

Daytime Phone #