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

NAME

STREET ADDRESS

CITY - ST - ZIP

FILED **PROFIT** Feb 16 1998 8:00am ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # S25170 (9) MEED SECURITIES CORP. Principal Place of Business Mailing Address 3589 SOUTH OCEAN BLVD. 3589 SOUTH OCEAN BLVD. SUITE 514 SUITE 514 DO NOT WRITE IN THIS SPACE PALM BEACH FL 33480 PALM BEACH FL 33480 3. Date Incorporated or Qualified 01/14/1991 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 65-027.1548 Not Applicable Suite, Apt. #, etc. Suite, Apit #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Ζφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BLAU, ERIC K. 3589 SOUTH OCEAN BOULEVARD Street Address (P.O. Box Number is Not Acceptable) SUITE 514 PALM BEACH FL 33480 84 City Zip Code 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 Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Tarn familiar with, and accept the propagations of, Section 697,0505. Florida Statutes.

SIGNATURE

SIGNATURE DATE shed name of registered aspent and lifte if appl 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11 TITLE BLAU, DOROTHY T. NAME 1,2 NAME 7 HARCOURT RD. SCARSDALE STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY** CITY-ST-ZIP 1.4 CHTY-ST-ZIP DELETE ☐ Addition 2.1 TITLE Change TITLE BLAU, MARK S. NAME 2.2 NAME 72 HORATIO ST STREET ADDRESS 2.3 STREET ADDRESS **NEW YORK FL** CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE ST NAME BLAU, ERIC K. 3.2 NAME 3589 SOUTH OCEAN BLVD. STREET ADDRESS 3.3 STREET ADDRESS PALM BEACH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADORESS CITY - ST - ZIP 4.4 CITY+ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY - ST - ZIP 54 CITY-ST-ZIP DELFTE ■ Addition Change TITLE 611IILE

6.2 NAME

63 STREET ADDRESS

6.4 CITY-ST-ZIP 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 armual 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 attrichment with an address. Feb. 10, 1998