

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

FILED

Apr 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S95445** (0)
1. Corporation Name
CASA WRAP HOLDING CORP.

Principal Place of Business 60 CUTTER MILL RD., SUITE 303 GREAT NECK NY 11021	Mailing Address 60 CUTTER MILL RD., SUITE 303 GREAT NECK NY 11021
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 11/20/1991	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 11-3090595	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country		29 Country		7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYES STREET TALLAHASSEE FL 32301				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOULD, FREDRIC H	1.2 NAME	
STREET ADDRESS	60 CUTLER MILL RD., SUITE 303	1.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY 11021	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOULD, JEFFREY	2.2 NAME	
STREET ADDRESS	% 60 CUTTER MILL RD #303	2.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRINBERG, SIMEON	3.2 NAME	
STREET ADDRESS	% 60 CUTTER MILL RD #303	3.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY	3.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOULD, MATTHEW J.	4.2 NAME	
STREET ADDRESS	60 CUTTER MILL RD STE	4.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY	4.4 CITY-ST-ZIP	
TITLE	VPAS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUNDY, MARK H	5.2 NAME	
STREET ADDRESS	60 CUTTER MILL RD. STE. 303	5.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY	5.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KALISH, DAVID	6.2 NAME	
STREET ADDRESS	60 CURTTER MILL RD. STE. 303	6.3 STREET ADDRESS	
CITY-ST-ZIP	GREAT NECK NY 11021	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 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.

SIGNATURE:

David Kalish

4/16/98

CR2E034 (10/97)