FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT



CORPORATION ANNUAL REPORT . 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT # 1. Corporation Name	V17693	(5)			
TRA LA LA, INC.					
Principa' Place of Business	Mailing Address 29 WEST 57TH ST 10TH FLOOR				
6875 WILLOW WOOD DR #2011					
BOCA RATON FL 33434 US		NEW YORK NY 10019 US			
Principal Plane of Business The Principal Plane of Business	2a. 1 26	Mailing Address			



US		US			03/02/1992	3a. Date of Last Report
2. Principal Pla	ce of Busness	2a. Mailing Address			4. FEI Number	03/08/1995
21		26			65-0318431	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				\$R 75 Additional
22 City & State		City & State			5. Certificate of Status Desired	Fee Required
23		28 28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ l	Country	Zip	Countr	/	This corporation has liability for in:	
24	25	[29]	30		Florida Statutes	X No
	9. Name and Address of Currer	it Hegistered Agent		1 :	10. Name and Address of New Re	gistered Agent
CHOCK	HASS SUPERGLE		81	Name		
ENGELHARD, SHELDON			82	82 Street Address (P.O. Box Number is Not Acceptable)		
	OWN CENTER RD		<u> </u>			
STE 80			83			
BUCA	RATON FL 33486		84	City		85 Zip Code
11 Durament to	the provisions of Costing 207 Of Co			l		-1 '
				named corpo oration's boa	oration submits this statement for the purpo and of directors. I hereby accept the appoin	ose of changing its registered offic
familiar with	, and accept the obligations of, Secti	ion 607.0505, Florida Statute)S.		S.	iumoni, as registered agent. I am
SIGNATURE	na a santa a s		·			
12.	lip at me, types,for printed name, of registeren agent OFFICERS ANI		OTE: Registered Age	nt signature require		DATE
THE	P	DELETE	1 1 THILE		ADDITIONS/CHANGES TO OFFIC	
NAME:	, Leigh, abby					☐ Change ☐ Addition
STREET ADDRESS	880 FIFTH AVE		1.2 NAME			
City-St-ZiP	NEW YORK NY 10021		1.3 STREE			
111.£	S S	☐ DELETE	14 CHY-5	T-ZIP		****
NAME	HONIG, ALAN		2 1 THTLE	ļ		☐ Change ☐ Addition
STREET ADDRESS	1501 BROADWAY, STE 131	12	2 2 NAME	Lanaraa		
0/1Y -S1-7₽	NEW YORK NY	13	2 3 STREET			
THE	NEW TOTAL III	☐ DELF1E	2 4 CITY - S 3 1 TH LE	I - ZIP		
NAME						Change Addition
STREET ADDRESS			3.2 NAME			
CITY-ST ZIP			33 STREE			
M.f		DELETE	34 CITY - 5	I-ZIP		F1.01 F3
NAME						Change Addition
STREET ACIDRESS			4 2 NAME	ADDDCCC		
0-11 - S7 - 7-2			4.3 STREET			
TILE		□ DELFTE	4.4 CHY-S 5.1 THE	1 · ZIP		
NAME		LJ DECEME	- 1			Change Addition
STHEET ADDRESS			5 2 NAME	100000		
o marrocatical			5.3 STREET			
OHY, CL. 240			5.4 CITY - S	T-ZIP		
CHY-SI-ZIP		☐ DELETA				
TuT. F		DELETE	6 1 TITLE			Change Addition
TITLE NAME		DELETE	6 1 TITLE 62 NAME			☐ Change ☐ Addition
Till.E		DELETE	6 1 TITLE			☐ Change ☐ Addition

certify that the information indicated op this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal efficient 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; appears in Block 12 or Block 13 if charged, or on an attachment with an address.

GNATURE:

SIGNATURE X