

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

**FILED**

**Feb 19 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 258574 (3)**  
1. Corporation Name  
**G.I.B. INC.**



Principal Place of Business <b>C/O HARVEY HOROWITZ, ESO SEPS&amp;S, 551 FIFTH AVE NEW YORK NY 10176 US</b>	Mailing Address <b>C/O HARVEY HOROWITZ, ESO SEPS&amp;S, 551 FIFTH AVE NEW YORK NY 10176 US</b>
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3. Date Incorporated or Qualified <b>05/02/1962</b>	3a. Date of Last Report <b>01/30/1996</b>
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21. Principal Place of Business <b>C/O Harvey Horowitz 239 East 79 St. New York NY 10021 USA</b>	22. Mailing Address <b>C/O HARVEY HOROWITZ 239 East 79 St. New York NY 10021 USA</b>	4. FEI Number <b>34-6542314</b>	Applied For <input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
23. City, State <b>New York NY</b>	27. City, State <b>New York NY</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
24. Zip <b>10021</b>	25. Country <b>USA</b>	29. Zip <b>10021</b>	30. Country <b>USA</b>

g. Name and Address of Current Registered Agent  
**NATIONAL CORPORATE RESEARCH, LTD., INC.  
1406 HAYS STREET, SUITE 2  
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	<b>FL</b>
83.	
84. City	

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]* **HARVEY HOROWITZ President 1/28/97**  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>PD</b>	<input type="checkbox"/> DELETE
NAME	<b>HOROWITZ, HARVEY E</b>	
STREET ADDRESS	<b>C/O SEPS&amp;S, 551 FIFTH AVE</b>	
CITY - ST - ZIP	<b>NEW YORK NY</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>HARVEY HOROWITZ</b>
13 STREET ADDRESS	<b>239 East 79th Street</b>
14 CITY - ST - ZIP	<b>New York, NY 10021</b>
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	<b>988882091968</b>
63 STREET ADDRESS	<b>-02/19/97--01051--038</b>
64 CITY - ST - ZIP	<b>***165.00</b>

14. I do 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: *[Signature]* **HARVEY HOROWITZ 1/28/97 212-861-8061**

CR2E034 (9/96)