

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Bureau of Corporations
and Records Administration
Tallahassee, Florida 32301-0001

APPROVED
AND
FILED

MAY - 1 PM 1:45

DOCUMENT # 835087

(8)

1. Corporation Name

HELMSLEY-SPEAR, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

60 EAST 42 STREET
NEW YORK NY 10017

Mailing Address

60 EAST 42 STREET
NEW YORK NY 10017

(DO NOT WRITE IN THIS SPACE)

3. Date incorporated or chartered

09/26/1975

3a. Date of Last Report

04/26/1994

4. FIC Number

13-1804307

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contributions

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199 (32)
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. State Apt. # etc.

26. State Apt. # etc.

22. City & State

27. City & State

23. City & State

28. City & State

24. City & State

29. City & State

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81. Name

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

83. City

84. State

FL

85. Zip Code

11. Pursuant to the provisions of Section 199.03(1)(b) of the 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 the law and Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME	PD HELMSLEY, HARRY B
STREET ADDRESS	36 CENTRAL PARK S
CITY, STATE, ZIP	NEW YORK NY
NAME	VD SCHNEIDER, IRVING
STREET ADDRESS	880 FIFTH AVE.
CITY, STATE, ZIP	NEW YORK NY
NAME	VD SCHWARTZ, ALVIN
STREET ADDRESS	33 BEVERLY ROAD
CITY, STATE, ZIP	GREAT NECK NY
NAME	D HELMSLEY, LEONA
STREET ADDRESS	36 CENTRAL PARK S
CITY, STATE, ZIP	NEW YORK NY
NAME	ST TAGLIANETTI, RICHARD
STREET ADDRESS	3135 GRAND AVENUE
CITY, STATE, ZIP	BALDWIN NY
NAME	VP HECHT, ROBERT
STREET ADDRESS	328 HEATHCOTE ROAD
CITY, STATE, ZIP	SCARSDALE NY

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition
NAME	Change	Addition

14. I, the undersigned, certify that the information supplied with this filing is correct and true and that I am duly qualified to sign the same. I further certify that the information included in this filing is true and correct and that no separate filing is required by Chapter 199, Florida Statutes, and that no separate filing is required by Chapter 199, Florida Statutes, and that no separate filing is required by Chapter 199, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT HECHT

4-24-95

Official Form 8