2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Feb 05, 2000 8:00 am Secretary of State DOCUMENT # F95000004430 SENTINEL REALTY CORP. III 02-05-2000 90049 018 ***150.00 Mailing Address Principal Place of Business 666 FIFTH AVENUE 666 FIFTH AVENUE NEW YORK NY 10103-0001 NEW YORK NY 10103 00016533 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State City & State 4. FEI Number 13-3759443 Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD **PLANTATION FL 33324** Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 掘り上げとり起 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) П ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. TITLE Change Delete TITLE STREICKER, JOHN H NAME NAME STREET ADDRESS STREET ADDRESS 666 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** ☐ Change Delete TITLE CASSIDY, MILLIE C NAME STREET ADDRESS STREET ADDRESS 666 FIFTH AVENUE CITY-ST-ZIP **NEW YORK NY** CITY-ST-7IP -- Change ~ □ Delete TITLE - - ---TITLE -WEINER, DAVID NAME NAME STREET ADDRESS STREET ADDRESS 666 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** X Change TITLE TITLE □ Delete

WEINBERGER, MICHAEL J NAME STREET ADDRESS STREET ADDRESS 666 FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** 13. 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 report or supplemental 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 receive of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with all other kielen powered.

TITLE

NAME

☐ Delete

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME STREET ADDRESS

TITLE

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

WERMAN, SUSAN T

666 FIFTH AVENUE

LONGO, ELIZABETH

666 FIFTH AVENUE

NEW YORK NY

NEW YORK NY

Kenny, Michael, J.

666 Fifth Avenue

New York, NY 10103

Applied For

Not Applicate

Addition

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☐ Addition

Addition

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Addition

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