Feb 24, 1999 8:00 am

Secretary of State

02-24-1999 90180 038 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 137315

1. Corporation Name

17 WEST ORANGE REALTY CO.

Principal Place	e of Business	Mailing Address			()BB(B) (tage)(() (BBB (i) () (BB))		
708 THIRD AVE	NUE	708 THIRD AVENUE					•
15TH FLOOR 15TH FLOOR					DO NOT WRITE IN THIS SPACE		
NEW YORK NY 10017 NEW YORK NY 10017					3. Date Incorporated or Qualifed	- OI ACL	
					04/07/1939		
A Delevised D	In the State of Provinces	2a. Mailing Address			4. FEI Number	Anı	plied For
2. Principal Place of Business		—, <u> </u>		59-6069558	<u> </u>	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 A		
22		27		5. Certifcate of Status Desired	Fee Re		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23	•	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Country	,	8. This corporation owes the current year li	ntangible	
24	25		30		Personal Property Tax.		□No
	9. Name and Address of Curre				10. Name and Address of New Registered	d Agent	
			81	Name			
FLOF	rence,robert s		82	Ctract Ac	ddress (P.O. Box Number is Not Acceptable)		
Dupont Building, 169 E. Flagler St.			02	Street	doress (F.O. box Rumber is Not Acceptable)		
MIAN	AI FL		83				
] o = 7: - c	2
			84	City	F	L 85 Zip C	,0de
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the abov	e-named co	orporation submits this statement for the purpose cation's board of directors. I hereby accept the appo	of changing its	registered
oπice or n agent. I ai	egistered agent, or both, in the State m familiar with, and accept the oblig	ations of, Section 607.0505, Flor	nda Statutes	i.	ation's board of directors. Thereby decept and app.		,
SIGNATURE			2.0	4	_		
GIGHATORE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE:		nt signature req	uired when reinstating) DATE		
12.		ND DIRECTORS	13.		'ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	MARX,LEONARD		1.2 NAME				
STREET ADDRESS	708 THIRD AVE.		1.3 STREE	TADORESS			- }
CITY-ST-ZIP	NEW YORK NY		14 CITY-S	T-ZIP			
TITLE	STD	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	ROTHOUSE, JESSIE		2.2 NAME	1			
STREET ADDRESS	708 THIRD AVE.		2.3 STREE	TADDRESS	نوان پیشون دانده میش دانیس		
CITY-ST-ZIP	NEW YORK NY		2. 4 CITY-	ST-ZIP			P7 4 3 86
TITLE	D DELETE		3.1 TITLE			Change	Addition
NAME	MARX,VIRGINIA		3.2 NAME				ļ
STREET ADDRESS	18 HEATHCOTE RD.		3.3 STREE	T ADDRESS			
CITY-ST-ZIP	SCARSDALE NY		3.4. CITY-5	ST-ZIP			
πιε		☐ DELETE	4.1 TITLE	\ 		Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADORESS			
CITY-ST-ZIP			4.4 CITY- S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				•
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	TADDRESS			ĺ

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 supplementar 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 changes or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE;

CITY-ST-ZIP