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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 370754

(4)

CROSSLAND DEVELOPMENT CORP.

PALED. PO IDF 2 97 JAN 13 PM 2: 10 SECRETARY CA STATE TALLAHASSEE, FLORIDA



Principal Place of Business ATTN: J. PANCETTI ** REPUBLIC - 452 5TH AVENUE NEW YORK NY 10018		Mailing Address ATTN: J. PANCETTI * REPUBLIC - 452 5TH AVENUE NEW YORK NY 10018			1 130100 (1)1(79017 DOUT (0007 STILL DATE BIRLY 67017 G1011 BIRLY 61011 HBB?			
						Date Incorporated or Qualified 10/05/1970	3a. Date of 09/30/19	
	lace of Business	2a, Mailing A	Address			4. FEI Number		Applied For
21		26				59-1378763		Not Applicable
Suite, Apt	#. etc.	Suite, Ap	ol #, etc.			5. Certificate of Status Desired		.75 Additional ee Required
City & State	0	City & St	ate			6. Election Campaign Financing	2	5.00 May Be
23		28				Trust Fund Contribution		dded to Fees
Zıp	Country	Zip		Country	,	8. This corporation has liability for in	ntangible tax u	nder s. 199.032,
24	25	29		30			Yes 🗌 No	
4	9. Name and Address of Curre	ent Registered Age	ent			10. Name and Address of New Re	gistered Agen	
THE	PRENTICE-HALL CORPORATION	ON SYSTEM INC.		81	Name			
1201 HAYS ST.					82 Street Address (P.O. Box Number is Not Acceptable)			
	E 105			L		4000020555948		
	AHASSEE FL 32301			83		700002	JOSS	34
				84	City		85	Zip Code
				04	l Cny		FL °°	Lip Gode
SIGNATURE 12.	Signar we typical or pointed name to implement a OFFICERS All	gent and talle if applicable	(NOT	E: Registered Ag	ent signature requ	ared when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRE	CTORS IN 12
TITLE	D	Ţ	DELETE	1 1 TITLE			□ C	hange Addition
NAME	DEZEGO, RICHARD C			1.2 NAME				
STREET ADDRESS	452 FIFTH AVENUE			1.3 STREET	ADDRESS			
City - St - ZIP	NEW YORK NY 10018			14 CHY-	ST-ZIP			
TITLE	D		DELETE	21 TITLE				hange Addition
NAME	MINEO, GASPAR J			22 NAME				
STREET ADDRESS	452 FIFTH AVENUE			2 3 STREE	ADDRESS			
CITY-S1-ZIP	NEW YORK NY 10018			2 4 CITY-	ST-ZIP			
TOLE	Đ		DELETE	3 1 TITLE				hange Addition
NAME	Cihanek, Edward			3.2 NAME				
STREET ADDRESS	452 FIFTH AVENUE			3.3 STREE	ADDRESS			
CITY-SI-ZIP	NEW YORK NY 10018	· · · · · · · · · · · · · · · · · · ·		3.4. CITY -	ST-ZIP			
TITLE	P		DELETE	4.1 TITLE				hange
NAME	PANCETTI, JOHN S			4. 2 NAME	ĺ			
STREET ADDRESS	452 FIFTH AVENUE			4 3 STREE	ADDRESS			
CITY - ST - ZIP	NEW YORK NY 10018		7 50.000	4 4 CITY-	31 - 7IP		····	
TITLE	ST	L	DELETE	5 1 TITLE				hange Additio
NAME	SAINSBURY, EMMA			5.2 NAME				
STREET ADDRESS	452 FIFTH AVENUE				ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10018	·	Tours	5.4 CITY - 1	S1 - ZIP			hanna I Address
TITLE		L	DELETE	6.1 TiTLE				hange Addition
NAME				6.2 NAME		(M	M
STREET ADDRESS					r Address	,	ルケイグ	5- VI I
CITY-ST-ZIP				64 CITY-	ST-ZIP		クタモ し	, · · /

14. Tab 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 suppliemental 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 or an attachment with an address.

SIGNATURE:

AZUME AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-97

212-525-1142



ACCOUNT NO. : 072100000032

REFERENCE : 218057

4323831

AUTHORIZATION

COST LIMIT :

\$ 165.00

ORDER DATE : January 10, 1997

ORDER TIME : 11:24 AM

ORDER NO. : 218057-015

400002055594--8

CUSTOMER NO:

4323831

CUSTOMER: Ms. Denise Watson

Republic National Bank Of New

452 Fifth Avenue

Tower 3

New York, NY 10018

ANNUAL REPORT FILING

NAME: CROSSLAND DEVELOPMENT CORP.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: JUAN E. JONES

EXAMINER'S INITIALS: