FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 805117 (9)

1. Corporation Name

NEW VALLEY CORPORATION

Principal Place of Business	Mailing Address
ONE MACK CENTRE DR ONE LAKE STREET PARAMUS NY 07652 US	ONE MACK CENTRE DRIVE C/O TAX DEPT.. 2-9 PARAMUS NJ 07652 US

2. Principal Place of Business	2a. Mailing Address
21 100 S.E. SECOND ST.	26 100 S.E. SECOND ST.
Suite, Apt. #, etc: 22 32nd FLOOR	Suite, Apt. #, etc.: 27 32nd FLOOR
City & State: 23 MIAMI, FL	City & State: 28 MIAMI, FL
Zip: 24 33131 · Country: 25	Zip: 29 33131 · Country: 30

3. Date Incorporated or Qualified: 10/24/1939
3a. Date of Last Report: 05/01/1995
4. FEI Number: 13-5482050 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No

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
84 City FL 85 Zip Code

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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE ______

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CO	☑ DELETE	1.1 TITLE	CD	☑ Change ☐ Addition
NAME	LEBOW, BENNETT S.		1.2 NAME		
STREET ADDRESS	ONE LAKE STREET		1.3 STREET ADDRESS	100 S.E. SECOND ST., 32nd FLOOR	
CITY-ST-ZIP	UPPER SADDLE RVR,NJ00000		1.4 CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	VT	☑ DELETE	2.1 TITLE	PD	☐ Change ☑ Addition
NAME	MCKEE, DONALD F		2.2 NAME	HOWARD M. LORBER	
STREET ADDRESS	ONE LAKE STREET		2.3 STREET ADDRESS	100 S.E. SECOND ST., 32nd FLOOR	
CITY-ST-ZIP	UPPER SADDLE RVR,NJ00000		2.4 CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	S	☑ DELETE	3.1 TITLE	TVD	☐ Change ☑ Addition
NAME	WALTERS, JOHN C.		3.2 NAME	GERALD E. SAUTER	
STREET ADDRESS	ONE LAKE STREET		3.3 STREET ADDRESS	100 S.E. SECOND ST., 32nd FLOOR	
CITY-ST-ZIP	UPPER SADDLE RVR,NJ00000		3.4 CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	VC	☑ DELETE	4.1 TITLE	S	☐ Change ☑ Addition
NAME	AMMAN, ROBERT J.		4.2 NAME	MARC N. BELL	
STREET ADDRESS	ONE LAKE STREET		4.3 STREET ADDRESS	100 S.E. SECOND ST., 32nd FLOOR	
CITY-ST-ZIP	UPPER SADDLE RVR,NJ0		4.4 CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	EP	☑ DELETE	5.1 TITLE	D	☐ Change ☑ Addition
NAME	CALVANO, JAMES F.		5.2 NAME	RICHARD S. RESSLER	
STREET ADDRESS	ONE LAKE STREET		5.3 STREET ADDRESS	100 S.E. SECOND ST., 32nd FLOOR	
CITY-ST-ZIP	UPPER SADDLE RVR NJ0		5.4 CITY-ST-ZIP	MIAMI, FL 33131	
TITLE	EVP	☑ DELETE	6.1 TITLE	D	☐ Change ☑ Addition
NAME	FUHRMAN, EDWARD J		6.2 NAME	RONALD J. KRAMER	
STREET ADDRESS	ONE LAKE STREET		6.3 STREET ADDRESS	100 S.E. SECOND ST., 32nd FLOOR	
CITY-ST-ZIP	UPPER SADDLE RVR NJ		6.4 CITY-ST-ZIP	MIAMI, FL 33131	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: ______ 1/22/96 305/579-8067
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR · Date · Daytime Phone #

CR2E034 (12/95)