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FILED

Feb 06 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 850450

(8)

1. Corporation Name

THACKERAY CORPORATION

Principal Place of Business

400 MADISON AVE
SUITE 1508
NEW YORK NY 10017
US

Mailing Address

400 MADISON AVE
SUITE 1508
NEW YORK NY 10017-1809
US

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

TITLE NAME STREET ADDRESS CITY- ST- ZIP

D

ROTHBERG, RONALD D.
400 MADISON AVE #1508
NEW YORK NY☐ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

D

SLADKUS, JOHN
400 MADISON AVE #1508
NEW YORK NY☐ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

D

ROTHMAN, MOSES
400 MADISON AVE
NEW YORK NY☐ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

AS

DONALDSON, RONA
400 MADISON AVE #1508
NEW YORK NY☒ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

VTSD

ROSS, JULES
400 MADISON AVE #1508
NEW YORK NY☐ DELETE

TITLE NAME STREET ADDRESS CITY- ST- ZIP

PD

RABINOWITZ, MARTIN
400 MADISON AVE #1508
NEW YORK NY☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP

☐ Change ☐ Addition

2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY- ST- ZIP

☐ Change ☐ Addition

3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY- ST- ZIP

☐ Change ☐ Addition

4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY- ST- ZIP

☐ Change ☒ AdditionAssistant Secretary
MARIA PETRILLO
400 MADISON AVENUE #1508
NEW YORK, NY 10017

5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST- ZIP

☐ Change ☐ Addition

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY- ST- ZIP

☐ Change ☐ Addition

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/30/97 212-759-3695

CR2E034 (9/96)