**FILED** 

Daytime Phone #

## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # F0000004810  1. Entity Name EASTWOOD PROPERTIES, INC.					Feb 17, 2002 8:00 am Secretary of State 02-17-2002 90062 022 ***150.00			
Principal Place of Business -600 THIRD AVENUE: 22ND FLOOR NEW YORK NY 10016		Mailing Address 600 THIRD AVENUE, 22ND FLOOR NEW YORK NY 10016'			DVU4047J			
2. Principal Place of Business		3. Mailing Address			T <u>redijār</u> aitt odan šotāš obur <del>b</del> aišt		SAN 200 M. J. J.	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State		4.	FEI Number 13-3224456	<del> </del>	oplied For ot Applicable	
Zip	Country	Zip	Country		Certificate of Status Desired	S8.75 Add Fee Required		
	6. Name and Address of Current Re	gistered Agent		7.	Name and Address of New Reg	istered Agent		
charteness caraba don 1777				Name				
CORPORATION SERVICE COMPANY 1201 HAYS STREET			Street	Address (P.O. E	Box Number is Not Acceptable)			
TALLAHASSEE FL 32301-2525			City FL Zip Code				е	
9. This corpo Tax filing r	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW!!! After May 1, 2002 Make Check Payable	FEE IS \$150	\$550.00 nt of State	10. Election Campaign Finan Trust Fund Contribution.	Added	0 May Be	
11.	OFFICERS AND DI	RECTORS	12.	A[	DDITIONS/CHANGES TO OFFICE			
.TITLE NAME .∂TREET ADDRESS CITY-ST-ZIP	PCD WANG, CC 600 THIRD AVENUE, 22ND FLOOI NEW YORK NY 10016	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	6 .		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WANG, VERA 600 THIRD AVENUE, 22ND FLOOI NEW YORK NY 10016	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WANG, KENNETH 600 THIRD AVENUE, 22ND FLOOI NEW YORK NY 10016	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Delete T ABOODI, ODED NEW YORK NY 10019			S		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	304 304	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	s		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
	certify that the information supplied with to not his report or supplemental report is to reporation or the receiver or trustee empower, or on an attachment with an address, with an address, with an address.							