2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F02000005498

TITLE

NAME

STREET ADDRESS

CITY-ST-21P

SVP

JANES, CARYN E

50 ROCKEFELLER PLAZA

NEW YORK, NY 100201605



FILED

Apr 30, 2007 8:00 am Secretary of State

☐ Change

☐ Addition

04-30-2007 90426 043 ***150.00 WELL (MULTI) QRS 15-17, INC. Principal Place of Business Mailing Address 40083334 **50 ROCKEFELLER PLAZA 50 ROCKEFELLER PLAZA** 2ND FL. 2ND FL. NEW YORK, NY 10020 NEW YORK, NY 10020 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For 11-3660324 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. CD TITLE ☐ Delete TITLE ☐ Change Addition CAREY, WILLIAM P NAME NAME STREET ADDRESS 50 ROCKEFELLER PLAZA STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10020 CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE DUGAN, GORDON F NAME NAME 50 ROCKEFELLER PLAZA STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10020 CITY-ST-ZIP PRESIDENT Addition Delete THIE Change TITLE BENJAMIN PAUL HARRIS CAREY, FRANCIS J NAME NAME 50 ROCKEFELLER PLAZA, 2ND FLOOR 50 ROCKEFELLER PLAZA STREET ADDRESS STREET ADDRESS NEW YORK, NEW YORK 10020-1605 CITY-ST-7IP NEW YORK, NY 10020 CITY-ST-ZIP ASSISTANT TREASURER Addition ☐ Delete ☐ Change TITLE TITLE ANSON S. WONG MUNSON, ELIZABETH NAME NAME 50 ROCKEFELLER PLAZA, 2ND FLOOR STREET ADDRESS 50 ROCKEFELLER PLAZA STREET ADDRESS NEW YORK, NEW YORK 10020-1605 NEW YORK, NY 10020 CITY-ST-ZIP CITY-ST-ZIP ASSISTANT SECRETARY TITLE ☐ Delete TITLE ☐ Change **K** Addition **GUERRERO, YASMIN** GEORGIA POLITAKIS NAME NAME STREET ADDRESS 50 ROCKEFELLER PLAZA STREET ADDRESS 50 ROCKEFELLER PLAZA, 2ND FLOOR NEW YORK, NY 100201605 CITY-ST-ZIP NEW YORK, NEW YORK 10020-1605 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Delete

ANSON S. WONG, ASSISTANT TREASURER 212-492-1100 SIGNATURE: Suson Wong, Usst heasurer SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR