2006 FOR PROFIT CORPORATION

FILED

, ANNUAL REPORT					May 10, 2006 08:00 Af			
DOCUMENT # F9300000036 1. Entity Name MERIWETHER PROPERTIES, INC.					Secre	etary of St	ate	
MEKIWE	THER PROPERTIES, INC.							
Principal Place of Business LARRY RAPOPORT 30 ROCKEFELLER PLAZA, ROOM 5600 NEW YORK, NY 10112 AND PRINCIPAL AND ADDRESS Mailing Address LARRY RAPOPORT 30 ROCKEFELLER PLAZA, NEW YORK, NY 10112			M 5500					
DO NOT WRITE IN THIS SPACE				05082006	No Chg-P	CR2E034 (11/05	•	
				4. FEI Numb 13-320		 - 1	Applied For Not Applicable	
		All A con colon dd o'Alle o co ch colonia		5. Certificate	of Status Desired	\$8.75 A Fee Requi		
	6. Name and Address of Current R	egistered Agent						
ROSENBERG, DONALD S ONE SOUTHEAST THIRD AVENUE, SUITE 2600				DO	NOT W	RITE		
MIAMI, FL 33131				IN .	THIS SF	PACE		
			7	13 W	,,,,,	7 1 mm		
	e named entity submits this statement for tions of registered agent.	he purpose of changing its register	ed office or reg	gistered agent, or bo	oth, in the State of Fig	orida. I am familiar will	t, and accept	
SIGNATURE.	Signature, typed or printed name of registered egent an	I title if applicable (NOTE, Registere	d Agent signature re	quired when ranslating)		DATE		
i i	LE NOW!!! FEE IS \$150.00 ue by September 6, 2006	Election Campaign Finar Trust Fund Contribution.	8. Election Campaign Financing \$5, Trust Fund Contribution. Add		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10.	OFFICERS AND D	RECTORS	7		<u> </u>			
NAME STREET ADDRESS CITY-ST-ZIP	O'NEILL, GEORGE D 30 ROCKEFELLER PLAZA ROOM NEW YORK, NY					4134		
MLE			1		05/20/0	5-80050-001	158.15	
NAME STREET ADDRESS						,		
TITLE			1					
NAME								
STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE					
DILE			1	IN :	THIS SF	PACE		
NAME STREET APORESS			1					
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	1					
TITLE NAME								
STREET ADDRESS			E					

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.

CITY-ST-ZIP DILE NAME STREET ADDRESS City-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/1/06

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