

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **F93000001202 (1)**

1. Corporation Name

FIRST WALL STREET MANAGEMENT COMPANY, INC.

Principal Place of Business

**26 BROADWAY, SUITE 1320
NEW YORK NY 10004**

Mailing Address

**26 BROADWAY, SUITE 1320
NEW YORK NY 10004**

APPROVED
AND
FILED

95 MAY -1 AM 10:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/04/1993

3a. Date of Last Report

06/28/1994

4. FEI Number

11-2935677

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. 193.032
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PLEETER, LOUIS J
2255 GLADES ROAD, SUITE 236-W
BOCA RATON FL 33431**

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 transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PTD**
NAME **FARKAS, ALAN**
STREET ADDRESS **26 BROADWAY, SITE 1320**
CITY- ST- ZIP **NEW YORK NY 10004**

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY- ST- ZIP

TITLE **V**
NAME **FARKAS, JODI B**
STREET ADDRESS **26 BROADWAY STE 1320**
CITY- ST- ZIP **NEW YORK NY**

21 TITLE ☒ Change ☐ Addition
22 NAME **Pollock, Paul M**
23 STREET ADDRESS **26 Broadway, STE 1320**
24 CITY- ST- ZIP **New York, N.Y. 10004**

TITLE **~~D~~**
NAME **~~FARKAS, JANE~~**
STREET ADDRESS **~~26 BROADWAY, SITE 1320~~**
CITY- ST- ZIP **~~NEW YORK NY 10004~~**

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY- ST- ZIP

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)(b), Florida Statutes. I further certify that the information submitted 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 in this report, or in an attachment with an address.

SIGNATURE:

Paul Pollock

(Signature typed or printed name of signing officer or director)

5/1/95

216-742-3770