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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

ANNUAL REPORT
1996

DIVISION OF CORPORATIONS F93000001739 (2) DOCUMENT # RUSTY REALTY INC. Principal Place of Business Mailing Address 178 NORFOLK STREET 178 NORFOLK STREET NEW YORK NY 10002 NEW YORK NY 10002 3. Date Incorporated or Qualified 3a. Date of Last Report 03/31/1993 05/01/1995 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 13-3341291 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required Crty & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Zip Country. 8. This corporation has liability for intangible tax under s 199,032, 🗌 Yes 💢 No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LANDE, HELEN A 82 Street Address (P.O. Box Number is Not Acceptable) 147 DUNBAR RD. 83 PALM BEACH FL 33480 City 84 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 horeby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agort signature required when recish eng-12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 Title ☐ Change Addition HOLZER, JANE B NAME 1.2 NAME 178 NORFOLK STREET STREET ADDRESS 1.3 STREET ADDRESS **NEW YORK NY 10002** CITY - ST - ZIP 1.4 CHY - ST - ZIP THE DELE TE 2 1 TITLE ☐ Change Addition GOLD, BESS NAME 2.2 NAME STREET ADDRESS 178 NORFOLK STREET 2.3 STREET ADDRESS CITY-ST-ZIP **NEW YORK NY 10002** 2.4 City - ST ZIP DFLETE TITLE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-71P 3.4 CITY - ST - ZIP TITLE DETELL 4.11111.8 Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5 1 TITLE ☐ Addition Change NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHTY - ST - ZIP TITLE DELETE 6 1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS COY-ST-7IP 6.4 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)(k), 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

1-23-96 (212) 260-8580
Date Destrict Phone #

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