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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F9300002952 (0)
MAITLAND WEST CORP.

新打印 國家教養養物 生物教育 安慰 人名英格兰英克莱比斯 医现状检查的 经转换 医二进术的 医二大管 多生的 医克雷氏管

FILED Apr 21 1997 8:00am Secretary of State



| Principal Place | | Mailing Address | MITTER AND | | | | | | |
|------------------------|---|--|------------------------|----------------------|--|------------------------------------|--------------------------------|-------------------|--|
| NEW YORK NY | H 8TREET, 24TH FLOOR / 10038 | 120 WEST 45TH STREET NEW YORK NY 10036-40 | | r . | | | | | |
| | | | | | 3. Date incorporated or Qualified 06/25/1993 | 3a. Date of Last Report 04/29/1996 | | | |
| _ | ace of Business | 2a. Mailing Address | | | 4, FEI Number 13-3712035 | Applied For | | | |
| 21 | W | 26 | | | 10-07 12000 | | <u> </u> | Not Applicable | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | | |
| City & State |) | City & Stato | | | 6. Election Campaign Financing | | \$5.0 | 00 May Be | |
| 23 | | 28 | | | Trust Fund Contribution | | Add | ed to Fees | |
| Zip 24 | Country | Country 7:p Country 25 30 | | , | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No | | | | |
| | 9. Name and Address of Curre | nt Registered Agent | 1301 | | 10, Name and Address of New Reg | | | | |
| THE | PRENTICE-HALL CORPORATION | ON SYSTEM INC. | 81 | Name | | | | | |
| | 1 HAYS STREET | | 82 | Street Add | dress (P.O. Box Number is Not Acceptab | le) | | | |
| | re 105 Lahassee fl 32301 | | 83 | | | | | | |
| . 1744 | ENTROOPE IE 05001 | | | | | | | | |
| | | | B4 | City | | FL | 85 7 | Zip Code | |
| 11. Pursuant t | o the provisions of Sections 607.050 | 02 and 607.1508, Florida Statut of Florida, Such change was | tes, the above | e-named cor | rporation submits this statement for the pation's board of directors. I hereby accep | urpose of | changir | ig its registered | |
| agent. I ar | n familiar with, and accept the oblic | gations of, Section 607.0505, FI | orida Statute | S. | and board or direction (no oby decep | t the appe | | as regional | |
| SIGNATURE | Signature, typed or printed name of registered ag | und need title if north other | The Domintored Apr | od eigestus een | ured when (einstaling) | DATE | | | |
| 12. | OFFICERS AN | ND DIRECTORS | 13. | and and manage roots | ADDITIONS/CHANGES TO OFFIC | | DIRECT | ORS IN 12 | |
| TITLE | PD | DELETE | 1.1 TITLE | | | | Chan | ge Addition | |
| NAME | FELDMAN, LAWRENCE | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 120 WEST 45TH STREET, 24 | TH FLOOR | 1.3 STREFT | ADDRESS | | | | | |
| CITY-ST-ZIP | NEW YORK NY 10038 | | 1.4 CiTY - S | ST - ZIP | | | | | |
| TITLE | TD ANTONY | ☐ DELETE | 2.1 TITLE | | | | Chan | ge 🔲 Addilion | |
| NAME | DILEONARDO, ANTONY 120 WEST 45TH STREET, 24TH FLOOR | | | | | | | 1 | |
| STREET ADDRESS | | IN FLOOK | 2.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | NEW YORK NY 10036 | | 2. 4 CITY- | ST-ZIP | | | | | |
| TITLE | | L DELETE | 3.1 11TLF | | | | Chan | ge LAddition | |
| NAME | | | 3.2 NAME | 1 | | | | 1 | |
| STREET ADDRESS | | | 3.3 STREET | | | | | | |
| CITY-\$T-ZIP | | T briefe | 3.4. CITY-1 | SI-ZIP | | | Chan | an I Addition | |
| TITLE | and the second second | ☐ DELETE | 4.1 TITLE | | | l | Chan | ge 🔲 Addition | |
| NAME | , | | 4. 2 NAME | | | | | | |
| STREET ADORESS | | | 4.3 STREET | 1 | | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 4.4 CHY- 5 5.1 THLE | 51 - 7IP | | | Chan | ge Addition | |
| | -t | [] otivit | 5.2 NAME | | | | , Onan | de 🗆 vaguou | |
| NAME STREET ADDRESS | , | | 5.3 STREET | ADDRESS | | | | | |
| | | | 5.4 CITY - 5 | 1 | | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 6.1 TITLE | 2) - 211 | | | Chan | ge Addition | |
| NAME | | | 6.2 NAME | | | ' | | | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6.4 C(1) - S | | | | | | |
| | y certify that the information supplie | ed with this filing does not qual | | | ed in Section 119.07(3)(i), Florida Statutes | s. I further | certify t | hat the | |

Information indicated on this annual report or supplementariantly 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 to the compowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or ordin guestiment with an address.

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