

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

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 24 AM 11:15

DOCUMENT # F93000003933 (9)

1. Corporation Name

TREASURE HOUSE SOUTH CORP.

Principal Place of Business

**C/O G. BOROS REALTY, INC.
888 SEVENTH AVENUE
NEW YORK NY 10108**

Mailing Address

**C/O G. BOROS REALTY, INC.
888 SEVENTH AVENUE
NEW YORK NY 10108**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/31/1993

3a. Date of Last Report

05/01/1994

4. FEI Number

13-3730284

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. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

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 filed application

(If/31E. Registered Agent (signature required) after registration)

(1A1)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	CHAZEN, LEONARD
STREET ADDRESS	C/O 520 MADISON AVENUE
CITY - ST - ZIP	NEW YORK NY 10022
TITLE	V
NAME	ULMER, JOHN
STREET ADDRESS	C/O 520 MADISON AVENUE
CITY - ST - ZIP	NEW YORK NY 10022
TITLE	S
NAME	WALDMAN, HANNAH
STREET ADDRESS	C/O 520 MADISON AVENUE
CITY - ST - ZIP	NEW YORK NY 10022
TITLE	T
NAME	ANDERSON, PETER
STREET ADDRESS	C/O 520 MADISON AVENUE
CITY - ST - ZIP	NEW YORK NY 10022
TITLE	D
NAME	GLADSTEIN, GARY
STREET ADDRESS	C/O 888 SEVENTH AVENUE
CITY - ST - ZIP	NEW YORK NY 10108
TITLE	D
NAME	MARKS, EVAN M
STREET ADDRESS	C/O 888 SEVENTH AVENUE
CITY - ST - ZIP	NEW YORK NY 10108

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	SECRETARY
3.3 STREET ADDRESS	RODGERS, KEVIN
3.4 CITY - ST - ZIP	530 MADISON AVE.
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	TREASURER
4.3 STREET ADDRESS	NELSEN, MICHAEL
4.4 CITY - ST - ZIP	530 MADISON AVE.
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 110.07(3)(b), 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 liquidator empowered to execute the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 (if applicable), or on an addition, with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EVAN M. MARKS

2/9/95 (212) 397 5530