

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

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 FEB 24 AM 11:15**

**DOCUMENT # F93000003939 (6)**

1. Corporation Name  
**SOPOCO CORP.**

Principal Place of Business

**C/O G. SOROS REALTY, INC.  
888 SEVENTH AVENUE  
NEW YORK NY 10106**

Mailing Address

**C/O G. SOROS REALTY, INC.  
888 SEVENTH AVENUE  
NEW YORK NY 10106**

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

**13-3730297**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$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

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**THE PRENTICE HALL CORPORATION SYSTEM, INC.  
1201 HAYS ST.  
SUITE 105  
TALLAHASSEE FL 32301**

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 membership)

(DATE)

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 10106**

TITLE **D**  
NAME **MARKS, EVAN M**  
STREET ADDRESS **C/O 888 SEVENTH AVENUE**  
CITY - ST - ZIP **NEW YORK NY 10106**

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

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3.1 TITLE ☒ Change ☐ Addition

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3.3 STREET ADDRESS

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4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

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5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

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6.1 TITLE ☐ Change ☐ Addition

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