FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY 30 AM 2:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-06/02/95--01008--019
****225.00 ****225.00

DOCUMENT # F93000054115

1. Corporation Name
Sternlicht Holdings II, Inc.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
Three Pickwick Plaza Greenwich CT 06830	Same

3. Date Incorporated or Qualified: 11/29/1993
3a. Date of Last Report: # 4/1/94

2. Principal Place of Business	2a. Mailing Address
21	26
Suite Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

4. FEI Number: 36-3892269 — 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 § 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT Corporation System 1200 South Pine Island Rd. Plantation FL 33324	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 _____ DATE
Signature, typed or printed name of registered agent, and title if applicable. NOTE: Registered Agent signature required when mandatory.

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Pres. & Director	11 TITLE	☐ Change ☐ Addition
NAME	Barry Sternlicht	12 NAME	
STREET ADDRESS	Three Pickwick	13 STREET ADDRESS	
CITY ST ZIP	Greenwich CT 06830	14 CITY ST ZIP	
TITLE	EVP.	21 TITLE	☐ Change ☐ Addition
NAME	Madison Grose	22 NAME	
STREET ADDRESS	Three Pickwick Plaza	23 STREET ADDRESS	
CITY ST ZIP	Greenwich CT 06830	24 CITY ST ZIP	
TITLE	EVP	31 TITLE	☐ Change ☐ Addition
NAME	Eugene A. Gargo	32 NAME	
STREET ADDRESS	Three Pickwick Plaza	33 STREET ADDRESS	
CITY ST ZIP	Greenwich, CT 06830	34 CITY ST ZIP	
TITLE	Senior V.P.	41 TITLE	☐ Change ☐ Addition
NAME	Jerome C. Silvey	42 NAME	
STREET ADDRESS	Three Pickwick Plaza	43 STREET ADDRESS	
CITY ST ZIP	Greenwich CT 06830	44 CITY ST ZIP	
TITLE	Sen. V.P.	51 TITLE	☐ Change ☐ Addition
NAME	Jonathan Eilian	52 NAME	
STREET ADDRESS	Three Pickwick Plaza	53 STREET ADDRESS	
CITY ST ZIP	Greenwich, CT 06830	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	CH

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)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 addition.

SIGNATURE: _____ 5/17/95 _____ 203-861-2100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #