

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2002 8:00 am
Secretary of State

01-28-2002 90044 048 ***158.75

DOCUMENT # F94000001753

1. Entity Name

BEACHHOUSE PROPERTIES, INC.

Principal Place of Business
% TOWER HOLDING NY CORP
452 5TH AVE. COMM. REAL EST - 3RD FL
NEW YORK NY 10018

Mailing Address
% TOWER HOLDING NY CORP
452 5TH AVE. COMM. REAL EST - 3RD FL
NEW YORK NY 10018

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

11-2631682

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☒

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CSD-THE UNITED STATES CORPORATION
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **DEZEGO, RICHARD C**
 CITY-ST-ZIP **452 FIFTH AVENUE**
NEW YORK NY 10018

TITLE ☐ Change ☒ Addition
 NAME **VP**
 STREET ADDRESS **John R. Greene**
 CITY-ST-ZIP **452 Fifth Avenue**
New York, NY 10018

TITLE ☐ Delete
 NAME **P**
 STREET ADDRESS **NAGLE, GERALD A**
 CITY-ST-ZIP **ONE HSBC CENTER**
BUFFALO NY 14203

TITLE ☐ Change ☒ Addition
 NAME **VP**
 STREET ADDRESS **John C. Lankes**
 CITY-ST-ZIP **One HSBC Center**
Buffalo, NY 14203

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **CIHANEK, EDWARD**
 CITY-ST-ZIP **452 FIFTH AVENUE**
NEW YORK NY 10018

TITLE ☐ Change ☒ Addition
 NAME **VP**
 STREET ADDRESS **Richard Werner**
 CITY-ST-ZIP **452 Fifth Avenue**
New York, NY 10018

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **STOKES, FLORENCE**
 CITY-ST-ZIP **452 FIFTH AVENUE**
NEW YORK NY 10018

TITLE ☐ Change ☒ Addition
 NAME **VP**
 STREET ADDRESS **Colleen Zielinski**
 CITY-ST-ZIP **452 Fifth Avenue**
New York, NY 10018

TITLE ☐ Delete
 NAME **S**
 STREET ADDRESS **HORWATH, NINA**
 CITY-ST-ZIP **452 FIFTH AVENUE**
NEW YORK NY 10018

TITLE ☐ Change ☒ Addition
 NAME **AS**
 STREET ADDRESS **Helen Kujawa**
 CITY-ST-ZIP **One HSBC Center**
Buffalo, NY 14203

TITLE ☒ Delete
 NAME **T**
 STREET ADDRESS **SOMMER, MARY B**
 CITY-ST-ZIP **ONE HSBC CENTER**
BUFFALO NY 14203

TITLE ☐ Change ☒ Addition
 NAME **AS**
 STREET ADDRESS **Pamela Pickel**
 CITY-ST-ZIP **One HSBC Center**
Buffalo, NY 14203

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Nina Horwath

January 11, 2002

Date

Daytime Phone #

CR2E034 (9/01)