SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # F9400003697 (9)

FILED Aug 08 1997 8:00am Secretary of State

KOLL IN	ivestment management,	INC.			 	
Principal Plac	ce of Business	Mailing Address				#114 #844 801 0 0 11418 61919 1844 1881 1881
4343 VON KARMAN AVE. 4343 VON KARMAN AVE.						
NEWPORT BEACH CA 92660 NEWPORT BEACH CA 9266			60			
					L	ITE IN THIS SPACE
					3. Date incorporated or Qualifie	·
2 Principal (Place of Business	2a. Mailing Address			07/14/1994 4. FEI Number	02/20/1996
21 Principal (Flace or Business	26 Page 1			33-0367147	Applied For Not Applicat
Suite, Apt. #, etc. Suite, Apt. #, etc.					33730/14/	CO 75 A
22					5. Certificate of Status Desired	Fee Required
City & Sta	ate	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zıp	Country	'	8. This corporation owes or has	paid the current year Intangible
24	25	29	30		Personal Property Tax due Ju	
	9. Name and Address of Currer	nt Registered Agent	81		10. Name and Address of New	Registered Agent
CT CORPORATION SYSTEM				Name		
1200 S. PINE ISLAND RD.			82	Street	Address (P.O. Box Number is Not Accep	table)
Pla	PLANTATION FL 33324					
			84	City		85 Zip Code
			1	_	corporation submits this statement for the poration's board of directors. I hereby according to the control of	FL `
SIGNATURE	Signature, hyped or printed name of registered age	ent and title if applicable (NO D DIRECTORS			required when reinstating)	DATE FIÇERS AND DIRECTORS IN 12
TITLE	EVPS					Change Additi
NAME	ROTH, HERBERT L.		1.2 NAME			
STREET ADDRESS			1.3 STREET	ADDRESS		
CITY-ST-ZIP	NEWPORT BEACH FL		1.4 CITY-S	t-ZIP		
TITLE	D	X) DELETE	2.1 TITLE	i	D/E.V.P.	Change X Additi
NAME	PATIN, NICHOLAS S.		2.2 NAME		HARRIS, WILLIAM M.	
STREET ADDRESS			2.3 STREET	ADDRESS	4343 Von Karman Avenu	e
CITY-ST-ZIP	NEWPORT BEACH CA		2.4 CITY-5	ST-ZIP	Newport Beach, CA 926	<u>60 </u>
TITLE	D	DELETE	3.1 TITLE			Change Additi
NAME	ROTHE, WILLIAM S		3.2 NAME			
STREET ADDRESS			3.3 STREET	ADDRESS :		
CITY-ST-ZIP	NEWPORT BEACH CA 92660		3.4. CITY - S	ST-ZIP		
TITLE	D ·	☐ DELETE	4.1 TITLE			Change Additi
NAME	WIRTA, RAYMOND E.		4. 2 NAME			
STREET ADDRESS			4.3 STREET			
CITY-ST-Z#	NEWPORT BEACH CA		4.4 CITY - S			V
TITLE	VOEO	☐ DELETE	5.1 TITLE		VC BREN, PETER M.	K Change Additi
NAME	BREN, PETER M		5.2 NAME			d 171 oou
STREET ADDRESS	120 2 10111 21112 20111 1	OR	5.3 STREET		767 Fifth Avenue, 23rd	a rioor
CITY-ST-ZIP	NEW YORK NY		5.4 CITY-S	T-21P	New York, NY 10153	
TALE	P	X DELETE	6.1 TITLE		P	Change & Additi
NAME	FEREN, ROBERT A		6.2 NAME		WOLLACK, RICHARD G.	
STREET ADDRESS	1 4343 VON KARMAN AVE.		6.3 STREET	ADDRESS	4343 Von Karman Avenu	Δ

CITY-ST-ZIP NEWPORT BEACH CA 92660

14. I do 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 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 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 channeld or of an attachment with an eddress.

CICALATURE.

WIGHET BRILLIAN

-1,167 (7/4/852 T252