

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # **F94000004283 (7)**

1. Corporation Name

PEOPLE & PROPERTIES, INC.

Principal Place of Business

**345 PARK AVE S.
NEW YORK NY 10010**

Mailing Address

**345 PARK AVE S.
NEW YORK NY 10010**

APPROVED
AND
FILED

MAY -1 AM 9:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **08/17/1994** 3b. Date of Last Report

4. FEI Number **13-2822440** 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

24. Country

2a. Mailing Address

26. Suite, Apt. #, etc.

27. City & State

28. Zip

29. Country

9. Name and Address of Current Registered Agent

**UNITED CORPORATE SERVICES, INC.
801 NE 167TH ST
SUITE 300
NORTH MIAMI BEACH FL 33162**

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 must be printed name of registered agent and filed applicant)

(NOTE: Registered Agent signature required after new filing)

(DATE)

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	ANDREA, ANTHONY
STREET ADDRESS	345 PARK AVE S.
CITY - ST - ZIP	NEW YORK NY 10010
TITLE	V
NAME	CHAPMAN, PETER
STREET ADDRESS	345 PARK AVE S.
CITY - ST - ZIP	NEW YORK NY 10010
TITLE	S
NAME	RIVIZZIGNO, ANTHONY
STREET ADDRESS	108 W. JEFFERSON, SUITE 500
CITY - ST - ZIP	SYRACUSE NY 13202
TITLE	V
NAME	GARIBALDI, LINDA
STREET ADDRESS	345 PARK AVE S.
CITY - ST - ZIP	NEW YORK NY 10010
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
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 119.07(3)(b), Florida Statutes. I further certify that the information included 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, changed, or as an attachment with an address.

SIGNATURE:

Linda Garibaldi Linda Garibaldi

5/1/95

(20) 779-6600

SIGNATURE AND TITLE ON PRINTED NAME OF BOARD OFFICER OR DIRECTOR

Date

(Type Name)