

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F95000000304			
1. Corporation Name <b>Page Plaza Retail, Inc.</b>			
Principal Place of Business 75 WALL ST. 12TH FL. NEW YORK NY 10265		Mailing Address 75 WALL ST. 12TH FL. NEW YORK NY 10265-0001	
2. Principal Place of Business		2a. Mailing Address	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.	
22. City & State		27. City & State	
23. Zip		28. Zip	
24. Country		29. Country	
25. Country		30. Country	
9. Name and Address of Current Registered Agent <b>THE PRENTICE HALL CORPORATION SYSTEM, INC. 1201 WAYS ST 105 TALLAHASSEE FL 32301</b>		10. Name and Address of New Registered Agent	
81. Name		82. Street Address (P.O. Box Number is Not Acceptable)	
83. City		84. City	
85. Zip Code		86. 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 reinstating.) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE PD HEUSEN, EREN 75 WALL STREET NEW YORK NY 10265 <input checked="" type="checkbox"/> DELETE		1.1 TITLE PD Marciano, Ben 75 Wall Street New York, NY 10265 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
1.2 NAME VP HEWITT, PETER G. 75 WALLSTREET NEW YORK NY 10265 <input checked="" type="checkbox"/> DELETE		1.2 NAME V Hadler, Thomas J. 75 Wall Street New York, NY 10265 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
1.3 STREET ADDRESS S GRIEVE, MARGARET M. 75 WALL STREET, 12TH FL. NEW YORK NY 10265 <input type="checkbox"/> DELETE		1.3 STREET ADDRESS 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.4 CITY-ST-ZIP TV MANDAVIA, NIKETU 75 WALL STREET NEW YORK NY 10265 <input type="checkbox"/> DELETE		1.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.5 NAME D NOBS, STEVE 75 WALL STREET NEW YORK NY 10265 <input type="checkbox"/> DELETE		1.5 NAME 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 300002182249 -05/19/97--01008--032 ***165.00 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
1.6 NAME D O'KANE, JOHN 75 WALL STREET NEW YORK NY 10265 <input type="checkbox"/> DELETE		1.6 NAME 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CS 5/8/97 <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 I changed, or on an attachment with an address.			
SIGNATURE: <b>Thomas J. Hadler V.P.</b> 4/29/97 (212) 412-3257			



CR2E034 (9/96)