

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

APPROVED
AND
FILED

96 FEB -7 PM 11:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F95000000342 (4)

1. Corporation Name

ASTER PROPERTIES, INC.

Principal Place of Business

7 WEST 34TH STREET
NEW YORK NY 10001

Mailing Address

7 WEST 34TH STREET
NEW YORK NY 10001

3. Date Incorporated or Qualified

01/23/1995

3a. Date of Last Report

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

13-2971539

Applied For

Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

23. City & State

28. City & State

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24. Zip

25. Country

29. Zip

30. Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PRENTICE-HALL CORPORATION SYSTEM, INC.
110 N. MAGNOLIA STREET
TALLAHASSEE FL 32301

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 typed or printed name of registered agent and the corporation

12. Registered Agent's signature and name (when providing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
PC
WENK, JOSEPH
STREET ADDRESS
7 WEST 34TH STREET
CITY, ST, ZIP
NEW YORK NY 10001

TITLE ☐ DELETE

NAME
VCVS
RODGERS, ROBERT
STREET ADDRESS
7 WEST 34TH STREET
CITY, ST, ZIP
NEW YORK NY 10001

TITLE ☐ DELETE

NAME
DVT
SIMS, MICHAEL
STREET ADDRESS
7 WEST 34TH STREET
CITY, ST, ZIP
NEW YORK NY 10001

TITLE ☐ DELETE

NAME
AV
FISHMAN, RONALD B
STREET ADDRESS
7 WEST 34TH STREET
CITY, ST, ZIP
NEW YORK NY 10001

TITLE ☐ DELETE

NAME
ASAT
SEIDNER, MARTIN
STREET ADDRESS
7 WEST 34TH STREET
CITY, ST, ZIP
NEW YORK NY 10001

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY, ST, ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

7.1 TITLE

7.2 NAME

7.3 STREET ADDRESS

7.4 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)(k), 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 changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Sims

1/27/96

(212) 971-9270

Daytime Phone #

CR2E034 (12/95)