

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2000 8:00 an  
Secretary of State

02-07-2000 90047 039 \*\*\*150.00

DOCUMENT # F95000001532

1. Entity Name

NEW IMAGE REALTY, INC.

Principal Place of Business

Mailing Address

888 SEVENTH AVE.  
SUITE 3400  
NEW YORK NY 10106-0199

888 SEVENTH AVE.  
SUITE 3400  
NEW YORK NY 10106-3499  
US

612212

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 88-0262895

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

NATIONAL CORPORATE RESEARCH, LTD., INC.  
1406 HAYES ST.  
SUITE 2  
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, 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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00  
Added to

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN

TITLE PD  
NAME WALLACE, PAUL F  
STREET ADDRESS 888 SEVENTH AVE.  
CITY-ST-ZIP NEW YORK NY 10106-0199 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐

TITLE VD  
NAME BORY, JUDITH  
STREET ADDRESS 888 SEVENTH AVE.  
CITY-ST-ZIP NEW YORK NY 10106-0199 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐

TITLE VD  
NAME LOPATER, LAWRENCE  
STREET ADDRESS 888 SEVENTH AVE, STE 3400  
CITY-ST-ZIP NEW YORK NY 10106 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐

TITLE S  
NAME SPOTO, ANTONINA L  
STREET ADDRESS 888 SEVENTH AVE.  
CITY-ST-ZIP NEW YORK NY 10106-0199 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐

TITLE T  
NAME KEVIN COLLINS  
STREET ADDRESS 888 SEVENTH AVE.  
CITY-ST-ZIP NEW YORK NY ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐

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 12, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Judith Bory*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/06/00  
Date

212-333-2  
Daytime Phone #