

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 20, 1999 8:00 am
Secretary of State

07-20-1999 90010 048 ***550.00

DOCUMENT # **F95000005721**

1. Corporation Name

REAL ESTATE SERVICES VII, INC.



Principal Place of Business

**3 WORLD FINANCIAL CENTER, 29TH FLOOR
NEW YORK NY 10285-2900**

Mailing Address

**3 WORLD FINANCIAL CENTER, 29TH FLOOR
NEW YORK NY 10285-2900**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/22/1995

2. Principal Place of Business

21
Suite, Apt. #, etc.

22
City & State

23
Zip

25
Country

2a. Mailing Address

26 **101 HUDSON STREET**
27 **TAX DEPT. - 39th FLOOR**

28
City & State

29
Zip

30
Country

4. FEI Number

13-3127697

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 owes the current year
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name **THE PRENTICE-HALL CORPORATION SYSTEM INC.**
82 Street Address (P.O. Box Number is Not Acceptable)
1201 HAYS STREET
83 **SUITE 105**
84 City **TALLAHASSEE** **FL** **85** Zip Code **32301**

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]** **-Vickie Schreiber-Asst. Vice-President** **July 8, 1999**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE
NAME **ANDRIOLA, ROCCO F**
STREET ADDRESS **3 WORLD FINANCIAL CENTER, 29TH FLOOR**
CITY-ST-ZIP **NEW YORK NY 10285-2900**

TITLE **VD** ☒ DELETE
NAME **ZAKIN, KENNETH L**
STREET ADDRESS **3 WORLD FINANCIAL CENTER, 29TH FLOOR**
CITY-ST-ZIP **NEW YORK NY 10285-2900**

TITLE **S** ☐ DELETE
NAME **MARRE, J**
STREET ADDRESS **3 WORLD FINANCIAL CENTER, 29TH FLOOR**
CITY-ST-ZIP **NEW YORK NY 10285-2900**

TITLE **S** ☐ DELETE
NAME **BANNON, EILEEN M.**
STREET ADDRESS **3 WORLD FINANCIAL CENTER, 29TH FLOOR**
CITY-ST-ZIP **NEW YORK NY 10285-2900**

TITLE **T** ☒ DELETE
NAME **O'BRIEN, BARRY J.**
STREET ADDRESS **101 HUDSON STREET**
CITY-ST-ZIP **JERSEY CITY NJ 01302-2900**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D** ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **MC'DERMOTT, WILLIAM T.**
2.3 STREET ADDRESS **3 WORLD FINANCIAL CENTER, 29TH FLOOR**
2.4 CITY-ST-ZIP **NEW YORK, NY 10285**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **MARRE, JENNIFER**
3.3 STREET ADDRESS **3 WORLD FINANCIAL CENTER, 24TH FLOOR**
3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME **AS**
4.3 STREET ADDRESS **3 WORLD FINANCIAL CENTER, 24TH FLOOR**
4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **PD**
5.3 STREET ADDRESS **MARRON, MICHAEL T.**
5.4 CITY-ST-ZIP **3 WORLD FINANCIAL CENTER, 29TH FLOOR**
NEW YORK, NY 10285

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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] **EILEEN M. BANNON**

07/9/99 (212) 526-2327

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

0715339