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

PROFIT **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600000853

1. Corporation Name

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90039 044 ***150.00

RCA REALTY MANAGEMENT SERVICES, INC.							
Principal Place of Business Mailing Address							
720 FIFTH AVE., 10TH FL. 720 FIFTH AVE., 10TH FL.							
NEW YORK NY 10019 NEW YORK NY 10019					DO NOT WRITE IN TH	IS SPACE	
					3. Date Incorporated or Qualifed		
					02/20/1996		
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Apr	olied For
21					76-047.4329		Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 A	
27						Fee Red	
	City & State City & State				6. Election Campaign Financing	\$5.00	•
23	28				Trust Fund Contribution	Added to	o rees
Zip					This corporation owes the current year Personal Property Tax.		□No
24	9. Name and Address of Currer		0]		10. Name and Address of New Registere		
•	9. Name and Address of Curren	it vedizielen väeur	81	Name	10. Hamo and Adares of the stage of the		
C T CORPORATION SYSTEM							
1200 SOUTH PINE ISLAND ROAD			82	Street Add	dress (P.O. Box Number is Not Acceptable)		1
PLAN	NTATION FL 33324		83		77.414		
						17717-775	
			84	City	F	85 Zip C	ode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at				e-named cor	reporation submits this statement for the purpose	of changing its	registered
i office or r	enictored agent or both in the State	of Florida, Such change was auti	norizea ov	tne corporal	tion's board of directors. I hereby accept the app	ointment as reg	gistered
	m familiar with, and accept the obliga	illons of, Section 607.0000, Florid	a Statutes	•			
SIGNATURE	Signature, typed or printed name of registered age	nt and little if applicable. (NOTE: R	egistered Agen	t signature requi	ired when reinstating) DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	С	☐ DELETE	1.1 TITLE			Change	☐ Addition
NAME	GERSCHEL, PATRICK A		1,2 NAME				
STREET ADDRESS	720 FIFTH AVE., 10TH FL.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	NEW YORK NY 10019		1.4 CITY-S	r-zip			67 A 1 111
TITLE	P	☐ DELETE	2.1 TITLE			Change	Addition
NAME	SCHERR, MARC D		2.2 NAME	1			
STREET ADDRESS	720 FIFTH AVE, 10TH FL		2.3 STREET	ADDRESS			
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP			
TITLE	VPT	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	Catti Latte, Butto		3.2 NAME	Ì			İ
STREET ADDRESS			3,3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			Addition
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4, 2 NAME				
STREET ADDRESS			43 STREET		•		
CITY-\$1-ZIP			4.4 CITY-S	T-ZIP		Change	Addition
THILE		☐ DELETE	5.1 TITLE 5.2 NAME			☐ cusuds	
NAME							1
STREET ADDRESS			5.3 STREET 5.4 CITY- ST				ļ
CITY-ST-ZIP			6.1 TITLE			☐ Change	Addition
TITLE			6.2 NAME				
NAME			6.3 STREET	ADDRESS			-
STREET AUDICESS			6.4 CITY-S				
CITY-ST-ZIP			L 0.7 OII 123				

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, with all other like empowered.

SIGNATURE: