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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000001099 (8)

ISLAND TRADING REAL ESTATE, INC.

## **FILED** Apr 02 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 825 8TH AVE.. 24TH FLOOR 825 8TH AVE.. 24TH FLOOR NEW YORK NY 10019 NEW YORK NY 10019 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/04/1996 Applied For COLUMBUS COLUMBUS CIACUS 13-3807313 Not Applicable Suite, Apt. #. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 27 City & State 6. Election Campaign Financing \$5.00 May Be ЮY NAM 23 28 Trust Fund Contribution Added to Fees Country This corporation owes or has paid the current year Intangible Yes □ No Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. VICE PRESIDENT & Change DELETE 1.1 TETLE TITLE DIRECTOR. LAWRENCE MESTER MESTEL, LAWRENCE 1.2 NAME NAME CIRCUE 825 8TH AVE., 24TH FLOOR 4 COLUMBUS 1.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 1.4 CITY-ST-ZIP NEW YORK CITY - ST - ZIP DELETE 2.1 TITLE TITLE VICE PRESIDENT FORSTER, JOHN NAME 22 NAME JOHN FORSTER 5th PL 825 8TH AVE., 24TH FLOOR 2.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10019** CITY-ST-ZIP 2. 4 CITY-ST-ZIP YORK Change Addition DELETE 3.1 TITLE DIRECTOR TITLE SECRETARY, CRUJEIRAS, DOREEN 3.2 NAME NAME CRUJURAS ooken 825 8TH AVE., 24TH FLOOR STREET ADDRESS 3.3 STREET ADDRESS **NEW YORK NY 10019** CITY-ST-ZIP 3 4. CITY-ST-ZIP DELETE 41 TITLE TITLE FRIEDMAN, MEG 4 2 NAME NAME PHIEDMAN STREET ADDRESS 825 8TH AVE., 24TH FLOOR 4.3 STREET ADDRESS COLUMBUS **NEW YORK NY 10019** CITY-ST-ZIP 4.4 CITY-ST-ZIP PRESIDENT DELETE 5.1 TITLE NAME 5.2 NAME WENDY HAMT STREET ADDRESS 5.3 STREET ADDRESS OCEAN PHIVE CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP CITY-ST-ZIP

Thereby 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.

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2/12/98