



2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90121 044 ***150.00

DOCUMENT # F96000001508 1. Entity Name UBS REAL ESTATE INVESTMENTS INC.					
Principal Place of Business 1285 AVE OF THE AMERICAS NEW YORK, NY 10019			Mailing Address 1285 AVE OF THE AMERICAS NEW YORK, NY 10019		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address Suite, Apt. #, etc. City & State Zip Country			
4. FEI Number 13-3843773				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOW, COLETTE 1285 AVENUE OF THE AMERICAS NEW YORK, NY 10019 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition Please See Attached List		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BLACKWOOD, ANGELLA 1285 AVE OF THE AMERICAS NEW YORK, NY 10019 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO HARRIS, BRIAN 1251 AVENUE OF THE AMERICAS NEW YORK, NY 10020 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D,T DYRVIK, PER 677 WASHINGTON BLVD STAMFORD, CT 06901 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EBER, LOUIS 1285 AVE OF THE AMERICAS NEW YORK, NY 10019 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT LEVINE, KENNETH 1000 HARBOR BLVD. WEEHAWKEN, NJ 07087 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  Secretary 4/24/08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

40081581



04222008 Chg-P CR2E034 (12/06)

ATTACHMENT

40081581

Report Officers/Directors
UBS Real Estate Investments Inc

F96000001508

Officers

Full Legal Name: George Mangiaracina
Title: President
Business Addr: 1251 Avenue of the Americas
New York, NY 10020

Full Legal Name: Louis DeVico
Title: Assistant Treasurer
Business Addr: 800 Harbor Blvd.
Weehawken, NJ 07086

Full Legal Name: Jane E. Nutson
Title: Secretary
Business Addr: 677 Washington Blvd
Stamford, CT 06901

Board of Directors

Full Legal Name: William Chandler
Business Addr: 677 Washington Blvd
Stamford, CT 06901

Full Legal Name: Hugh Corcoran III
Business Addr: 1285 Avenue of the Americas
New York, NY 10019

Full Legal Name: Jack McCleary
Business Addr: 1285 Avenue of the Americas
New York, NY 10019

Full Legal Name: James Reichel
Business Addr: 1285 Avenue of the Americas
New York, NY 10019

Full Legal Name: Per Dyrvik
Business Addr: 677 Washington Blvd
Stamford, CT 06901