## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # F9600002708 Aug 02, 2000 8:00 am Secretary of State 1. Entity Name WETENHALL REALTY CORPORATION 08-02-2000 90004 032 \*\*\*550.00 Principal Place of Business Mailing Address % THE COLONY HOTEL C/O PERETZ. MITGANG & CO. LLP 155 HAMMON AVENUE 303 S BROADWAY STE 105 PALM BEACH FL 33480 **TARRYTOWN NY 10591-5410** 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 13-3935902 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City Zio 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 DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. ☐ Delete ☐ Addition TITI F TITLE WETENHALL, ROBERT C NAME NAME STREET ADDRESS STREET ADDRESS % THE COLONY HOTEL, 155 HAMMON AVENUE CITY-ST-ZIP CITY-ST-ZIP PALM BEACH FL 33480 Addition Change | Delete TITI F TITLE NAME EDELMAN. MARTIN L NAME STREET ADDRESS STREET ADDRESS % BATTLE FOWLER LLP. 75 EAST 55TH STREET CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY 10022** Change Addition TITLE ☐ Delete TITLE PERETZ, DAVID M ÑÂMÉ NAME STREET ADDRESS STREET ADDRESS 303 S BROADWAY STE 105 CITY-ST-ZIE **TARRYTOWN NY 10591-5410** CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME j) STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.