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

**PROFIT CORPORATION ANNUAL REPORT** 

**19**98

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F97000001978 (2)

KRONUS PROPERTY, INC.

Mailing Address Principal Place of Business 2 MANHATTANVILLE ROAD 2 MANHATTANVILLE ROAD PURCHASE NY 10577 PURCHASE NY 10577 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/15/1997 2a. Mailing Address 2. Principal Place of Business Applied For 51-0376457 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and trile if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. Change Addition PCD DELETE 1.1 TITLE TITLE HANNAN, JOHN J 1.2 NAME NAME 1301 AVENUE OF THE AMERICAS 1.3 STREET ADDRESS STREET ADDRESS **NEW YORK NY** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition VSD 2.1 TITLE TITLE WEINER, MICHAEL D 2.2 NAME 1999 AVENUE OF THE STARS STREET ADDRESS 2 3 STREET ADDRESS LOS ANGELES CA 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5 3 STHEET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 61 TITLE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS

64 CITY-ST-ZIP

14. 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.

(914) 694\_8000

**FILED** 

Apr 16 1998 8:00am

Secretary of State