

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

GNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT #F97000006485

1. Entity Name
THR DOLPHIN CORP.



FILED Apr 28, 2008 08:00 AN Secretary of State

Principal Place of Business

666 FIFTH AVENUE NEW YORK, NY 10103 Mailing Address

C/O TISHMAN ASSET CORPORATION 666 5TH AVE., 36TH FLOOR NEW YORK, NY 10103



04102008

No Chg-P

CR2E034 (11/05)

4. FEI Number 13-3972099 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FILDES, RICHARD J 215 NORTH EOLA DRIVE ORLANDO, FL 32801

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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 Signature: typed or printed name of registered agent and title if applicable. (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. 55.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CCEO VICKERS, JOHN A 666 FIFTH AVENUE, 36TH FLOOR NEW YORK, NY 10103				U00000924375 05/16/08-80071-015 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TISHMAN, JOHN L 666 FIFTH AVENUE, 36TH FLOOR NEW YORK, NY 10103				· .
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D/P SALES, WILLIAM J 666 FIFTH AVENUE, 36TH FLOOR NEW YORK, NY 10103			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-S1-ZIP	D JOHNSON, JULIANA C 666 FIFTH AVENUE, 36TH FLOOR NEW YORK, NY 10103		!	IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ECHEVARRIA, EVELYN 6707 FAIRVIEW RD., STE D CHARLOTTE, NC 28210			٠	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP ENGFER, DONALD 666 FIFTH AVE NEW YORK, NY 10103				
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 attantiment with an address, with all other like empowered.					