2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

F97000006642

1. Entity Name

RECIXV, INC.



FILED Apr 24, 2003 8:00 am Secretary of State

04-24-2003 90216 038 ***150.00

			V		´				
% REAL EST	ce of Business ATE CAPITAL PARTNERS LP E OF THE AMERICAS 18TH FLOOR IY 10036-2601	Mailing Address % REAL ESTATE CAPITAL PARTNERS LP 1185 AVENUE OF THE AMERICAS 18TH FLOOR NEW YORK NY 10036-2601							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. F	13-3961226 .	├	pplied For ot Applicable	
Zip Country		Zip	Zip Country		5. (Certificate of Status Desired	\$8.75 Ad	ditional	
	6. Name and Address of Current F	legistered Agent	<u> </u>	T	7. N	lame and Address of New Registered	Agent	-	
•		<u>.</u>		Name					
CORPORATION SERVICE COMPANY					/D.O. D.	1			
1201 HAYS STREET				Street Address	\$ (P.O. B	ox Number is Not Acceptable)			
TALLAHASSEE FL 32301-2525				****					
IALLAHA	33EE FL 32301-2323	•		City	-	——————————————————————————————————————	7in Cos		
				City		FL	Zip Cod	ie i	
	e named entity submits this statement for	the purpose of chan	ging its register	ed office or regist	tered age	ent, or both, in the State of Florida. I am	familiar with,	and accept	
the obliga	tions of registered agent.								
SIGNATURE									
	Signature, typed or printed name of registered agent an	d title if applicable.	(NOTE: Registere	d Agent signature requir	red when rei	instating) DATE			
F	ILE NOW!!! FEE IS \$150.00								
After May 1, 2003 Fee will be \$550.00						 Election Campaign Financing Trust Fund Contribution. 		0 May Be	
Make Chec	k Payable to Florida Department of	State				rest rate contribution.		101665	
10.	OFFICERS AND D	DIRECTORS	11.		AD	DITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 11	
TITLE	PD	Delei	te TITLE	E .			☐ Change	☐ Addition	
NAME	KINNEY, ROBERT L		NAMI	E					
STREET ADDRESS	1185 AVENUE OF THE AMERICAS	18TH FLOOR	STRE	ET ADDRESS					
CITY-ST-ZIP	NEW YORK NY 10036-2601	12	CITY	-ST-ZIP					
TITLE	lv	☐ Delet	te TITLE				Change	Addition	
NAME	SHEWER, KARIN E		NAMI	- I				1	
STREET ADDRESS 1185 AVENUE OF THE AMERICAS 18TH FLOOR				ET ADDRESS					
CITY-ST-ZIP	NEW YORK NY 10036-2601			-ST-ZIP					
TITLE	DV	☐ Delet					Change	Addition	
NAME CTREET ADDRESS	LAMLE, HUGH R		NAME					-	
STREET ADDRESS 1185 AVENUE OF THE AMERICAS 18TH FLOOR				ET ADDRESS - ST- ZIP				İ	
	NEW_YORK NY 10036-2601								
TITLE NAME	V	Delet	e TITLE				☐ Change	☐ Addition	
STREET ADDRESS	WINTER, MARTIN E 1185 AVENUE OF THE AMERICAS	10TH FLOOD		ET ADDRESS					
CITY-ST-ZIP	NEW YORK NY 10036-2601	IOIN FLOUR		-ST-ZIP					
TITLE	S	☐ Delet	e TITLE	:			Change	Addition	
NAME	MCGEE, ROBERT J	<u> </u>	NAME	1			Onlange		
STREET ADDRESS	1185 AVENUE OF THE AMERICAS	18TH FLOOR		ET ADDRESS					
CITY-ST-ZIP	NEW YORK NY 10036-2601		CITY-	-ST-ZIP					
TITLE	T	☐ Deleti	e TITLE		,	77.712.	☐ Change	Addition	
NAME	WINTER, MARTIN E		NAME	:			•		
STREET ADDRESS	1185 AVENUE OF THE AMERICAS	18TH FLOOR	STREE	ET ADDRESS				ľ	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

NEW YORK NY 10036-2601

CITY-ST-ZIP

212-843-6100