

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # F98000000373

1. Entity Name
TISHMAN ASSET CORPORATION



Principal Place of Business

666 FIFTH AVENUE
36TH FLOOR
NEW YORK, NY 10103

Mailing Address

666 FIFTH AVENUE
36TH FLOOR
NEW YORK, NY 10103



04062005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-3972101

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

000000323426
04/22/05-80051-007 150.00

10. OFFICERS AND DIRECTORS

TITLE	CCEO
NAME	VICKERS, JOHN A
STREET ADDRESS	666 FIFTH AVENUE
CITY-ST-ZIP	NEW YORK, NY 10103
TITLE	P
NAME	SALES, WILLIAM J
STREET ADDRESS	666 FIFTH AVENUE
CITY-ST-ZIP	NEW YORK, NY 10103
TITLE	EV
NAME	MAHONEY, DENNIS
STREET ADDRESS	666 FIFTH AVENUE
CITY-ST-ZIP	NEW YORK, NY 10103
TITLE	EV
NAME	LIVINGSTON, JOHN T
STREET ADDRESS	666 FIFTH AVENUE
CITY-ST-ZIP	NEW YORK, NY 10103
TITLE	EV
NAME	SIMONE, JOSEPH J
STREET ADDRESS	666 FIFTH AVENUE
CITY-ST-ZIP	NEW YORK, NY 10103
TITLE	EV
NAME	TISHMAN, DANIEL R
STREET ADDRESS	666 FIFTH AVENUE
CITY-ST-ZIP	NEW YORK, NY 10103

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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:

Larry Schwarzwald
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/05 212-708-6843
Date Daytime Phone #