2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 08:00 AN Secretary of State DOCUMENT # F98000000375 1. Entity Name THR DEVELOPMENT MANAGEMENT INC. Principal Place of Business Mailing Address % TISHMAN ASSET CORPORATION % TISHMAN ASSET CORPORATION 666 FIFTH AVENUE 666 FIFTH AVENUE NEW YORK, NY 10103 NEW YORK, NY 10103 CR2E034 (11/05) 04062006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 13-3972097 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when retristating) FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10, CCEÒ TITLE NAME VICKERS, JOHN A STREET ADDRESS 666 FIFTH AVENUE NEW YORK, NY 10103 CITY-ST-ZIP TITLE U00000529388 05/05/06-80071-020 150.00 NAME SALES, WILLIAM J STREET ADDRESS 666 FIFTH AVENUE NEW YORK, NY 10103 CDY-ST-ZIP ΕV TITLE LIVINGSTON, JOHN NAME 666 FIFTH AVENUE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP NEW YORK, NY 10103 IN THIS SPACE TITLE SIMONE, JOSEPH J NAME STREET ADDRESS 666 FIFTH AVENUE

12. I hereby certify that the information supplied with this filling 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 cath; 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 synadicess, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP TITLE

NAME

NEW YORK, NY 10103

TISHMAN, DANIEL R

666 FIFTH AVENUE NEW YORK, NY 10103

BUSCEMI, GARY

666 FIFTH AVENUE

NEW YORK, NY 10103

PED OR PRINTED N OF SIGNING OFFICER OR DIRECTOR 4/11/06