

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2002 8:00 am
Secretary of State

02-17-2002 90020 044 ***150.00

DOCUMENT # F98000004541

1. Entity Name
PORT.95 INDUSTRIAL REALTY CORPORATION

Principal Place of Business	Mailing Address
C/O J.P. MORGAN INVESTMENT MGMT INC. 522 FIFTH AVE. 19TH FLOOR NEW YORK NY 10022 US	C/O J.P. MORGAN INVESTMENT MGMT INC. 522 FIFTH AVE. 19TH FLOOR NEW YORK NY 10022 US

80025907



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
JPMorgan Chase Bank Suite, Apt. #, etc. 522 5th Ave City & State New York, NY Zip 10036 Country USA	JPMorgan Chase Bank Suite, Apt. #, etc. 522 5th Ave. City & State New York, NY Zip 10036 Country USA

4. FEI Number	13-4018220	Applied For
		<input type="checkbox"/> Not Applicable
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CITICORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) **DATE** _____

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
DVAS	PFEIFFER, ANNE S	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
23 WALL STREET	NEW YORK NY 10260-0023	522 5th Ave.	NEW YORK, NY 10036
<input type="checkbox"/> Delete			
DVPT	ASTARITA, MICHAEL G	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
23 WALL STREET	NEW YORK NY 10260-0023	522 5th Ave.	NEW YORK, NY 10036
<input type="checkbox"/> Delete			
VASD	GILBERTO, S M	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
23 WALL STREET	NEW YORK NY 10260-0023	522 5th Ave.	NEW YORK, NY 10036
<input type="checkbox"/> Delete			
VASD	OCHS, GEORGE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
23 WALL STREET	NEW YORK NY 10260-0023	522 5th Ave.	NEW YORK, NY 10036
<input type="checkbox"/> Delete			
PD	GIFFORD, BENJAMIN G	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
23 WALL STREET	NEW YORK NY 10260-0023	522 5th Ave.	NEW YORK, NY 10036
<input type="checkbox"/> Delete			
SAT	MANCUSO, ANNE M	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
23 WALL STREET	NEW YORK NY 10260-0023	SAT	Dort, Alfred W.
<input checked="" type="checkbox"/> Delete		522 5th Ave.	NEW YORK, NY 10036

13. 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 11 or Block 12 if changed, or on an attachment with an address with all other information empowered.

SIGNATURE: _____ **1/28/02** **212-483-2323**
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)