2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

G46518 **DOCUMENT #**



FILED May 05, 2003 8:00 am Secretary of State

HSHMAN	REALTY	CORPORATION C	OF LAKE BUE	ENA VISTA			05-05-2003	9026/ 021	***150	1.00	
Principal Place of Business 666 FIFTH AVE. 36TH FLOOR NEW YORK NY 10103 US 2. Principal Place of Business			Mailing Address 666 FIFTH AVE. 36TH FLOOR NEW YORK NY 10103 US 3. Mailing Address								
			Suite, Apt. #, etc.								
Suite, Apt. #, etc.							☐ CHECK HERE IF MAKING CH				
City & State			City & State			4. FEI Numbe	13-3 108 198			plied For t Applicable	
Zip	Country		Zip	Cour	ntry	5. Certificate of Status Desired			\$8.75 Additional Fee Required		
	6. Name	and Address of Current	Registered Agent			7. Name and	Address of New Re	egistered Agen	t		
					Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET					Street Address	s (P.O. Box Number is Not Acceptable)					
	SSEE FL 32	301									
		•	Cit		City			FL 2	Zip Code	,	
	named entity tions of regist	y submits this statement fo ered agent.	r the purpose of ch	nanging its register	red office or registe	red agent, or bot	h, in the State of Flor	rida. I am famili	ar with, a	and accept	
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if applicable.	(NOTE: Registere	ed Agent signature require	d when reinstating)		DATE	_		
Afte	r May 1, 200	! FEE IS \$150.00 03 Fee will be \$550.00			-		ection Campaign Fin			0 May Be	
Make Check	k Payable to	Florida Department o	f State			Tru	st Fund Contribution	ı. 🗆	Added	to rees	
Make Check 10.	k Payable to	OFFICERS AND		11.			CHANGES TO OFFI				
	S	OFFICERS AND	DIRECTORS	11. Delete TITL				CERS AND DIR			
10.	S	OFFICERS AND KATHLEEN TH AVE.	DIRECTORS	Delete TITL NAM STR	.E			CERS AND DIR	ECTORS	S IN 11	
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12. I hereby certify that the information supplied with this filling 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.

SIGNATURE: