

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 31 PM 2: 54

DOCUMENT # H53053

(5)

1. Corporation Name

SCOTTWOOD ENTERPRISES, INC.

Principal Place of Business

C/O THE BROADSTONE GROUP, INC
888 7TH AVE. STE 3400
NEW YORK NY 10106

Mailing Address

C/O THE BROADSTONE GROUP, INC
888 7TH AVE. STE 3400
NEW YORK NY 10106

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/19/1985

3a. Date of Last Report

02/01/1994

4. FEI Number

59-2521892

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

22

27

Zip

Country

Zip

Country

23

28

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BERGER, MITHCELL W.
BERGER & SHAPIRO
100 NE 3RD AVE, STE 400
FT. LAUDERDALE FL 33301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME WALLACE, STEPHANIE
STREET ADDRESS 888 SEVENTH AVENUE, SUITE 3400
CITY- ST- ZIP NEW YORK NY

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

TITLE DV
NAME DELBENE, GERARD N
STREET ADDRESS 888 SEVENTH AVENUE, SUITE 3400
CITY- ST- ZIP NEW YORK NY

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME DELETE
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

TITLE V
NAME GROSSI, NICHOLAS
STREET ADDRESS 888 7 AVE
CITY- ST- ZIP NEW YORK NY

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

TITLE S
NAME SPOTO, ANTONINA L
STREET ADDRESS 888 7 AVE
CITY- ST- ZIP NEW YORK NY

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

TITLE TAS
NAME RICCI, MICHAEL
STREET ADDRESS 888 SEVENTH AVENUE, SUITE 3400
CITY- ST- ZIP NEW YORK NY

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Antonina L. Spoto

Antonina L. Spoto

1/30/95

212-333-2100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number