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FILED

Jan 29 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # L57265

(5)

1. Corporation Name

ROUTE 436 CORPORATION

Principal Place of Business

7 STONEHOUSE RD  
226 W ALFRED ST  
SCARSDALE NY 10583  
US

Mailing Address

C/O HOCHBERG, AUDREY. G  
7 STONEHOUSE RD  
SCARSDALE NY 10583-2913  
US

3. Date Incorporated or Qualified

03/12/1990

3a. Date of Last Report

02/09/1996

4. FEI Number

59-3014421

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 C/O PAUL, RICHARD A P.A.

Suite, Apt. #, etc.

22 429 EAST MAGNOLIA AVE

City & State

23 EUSTIS, FL 32727

Zip

24 32727

Country

2a. Mailing Address

26 C/O HOCHBERG, HERBERT L.

Suite, Apt. #, etc.

27 7 STONEHOUSE RD.

City & State

28 SCARSDALE, NY

Zip

29 10583-2913

Country

30

9. Name and Address of Current Registered Agent

PAUL, RICHARD A PA  
429 EAST MAGNOLIA AVE  
EUSTIS FL 32727

10. Name and Address of New Registered Agent

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VPS ☐ DELETE

NAME HOCHBERG, HERBERT L

STREET ADDRESS 7 STONEHOUSE RD

CITY-ST-ZIP SCARSDALE NY

TITLE P ☐ DELETE

NAME BOGIN, MERLE G

STREET ADDRESS 176 E. 71ST ST.

CITY-ST-ZIP NEW YORK NY

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME HOCHBERG, HERBERT L.

1.3 STREET ADDRESS 7 STONEHOUSE RD

1.4 CITY-ST-ZIP SCARSDALE, NY 10583

2.1 TITLE VICE PRESIDENT ☒ Change ☐ Addition

2.2 NAME BOGIN, MERLE G.

2.3 STREET ADDRESS 176 E. 71ST STREET

2.4 CITY-ST-ZIP NEW YORK, NY 10021

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Herbert L. Hochberg

Jan. 13, 1997 212 409-2159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0006376

CR2E034 (9/96)