FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

C/O TISHMAN SPEYER PROPERTIES



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P00525

TISHMAN SPEYER PROPERTIES, INC.

(6)

Mailing Address

C/O TISHMAN SPEYER PROPERTIES

FILED FLORIDA DEPARTMENT OF STATE Feb 12 1997 8:00am Sandra B. Mortham

Secretary of State



NEW YORK NY 10022			NEW YORK NY 10022-4213						
	2					3. Date Incorporated or Qualified 01/09/1984	3a. Date of 04/28/	Last R 1996	eport
2. 21	Principal Place of Busi	ness	2a. Mailing Address 26			4. FEI Number 13-3204710			plied For at Applicable
22	Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$		Additional
	City & State	The second secon	City & State			6. Election Campaign Financing Trust Fund Contribution		5.00	May Be
	Zip	Country	Zip	Country	/	8. This corporation has liability for in	ntangible tax	under s	
24	O Name	25 and Address of Current	29 Pagistared Agent	30		Florida Statutes 10. Name and Address of New Rec	Yes 🔲 N	-	
		E-HALL CORPORATION		81	Name	10. Name and Address of New Hel	Jistered Ager)t	
	1201 HAYS S		t OTOTEM, INC.	"	INALLE				
	SUITE 105	(T LL T		82	Street	Address (P.O. Box Number is Not Acceptab	le)		
	TALLAHASSEI	FL 32301		83				····	·
				84	City		85	Zip	Code
							FL		
11.	 Pursuant to the provis office or registered ag agent. I am familiar w 	sions of Sections 607.0502 gent, or both, in the State i ith, and accept the obliga	? and 607.1508, Florida Statute of Florida. Such change was a dions of. Section 607.0505, Flo	es, the abov uthorized by rida Statute	e-named y the corp s.	corporation submits this statement for the population's board of directors. I hereby acception	urpose of cha It the appoints	nging it nent as	s registered registered
SIC	Standt und transf	d or printed name of registered agen	a and the if and and a (NOTE	- Pagistared An	av tannia ta	required when reinstating)	DATE		
12		OFFICERS AND		13.	ent signature	ADDITIONS/CHANGES TO OFFIC		FOTOE	S IN 12
1.11	CD C	V C T S ()	DELETE	1.1 TITLE		7,5511101107011111101070 01110		Change	Addition
NAN		n, robert v.		1.2 NAME					
STR		DISON AVENUE		1.3 STREET	ADDRESS				
CIT	NEW YO	DRK NY		1.4 CITY - S					
1111	F \$0		XX DELETE	2.1 TITLE		Secretary		Change	Addition
NAM	_{if} ROTH, (BARY W		2.2 NAME		Nathan, J. Andrew		•	. · · · · · · · · · · · · · · · · · · ·
STR	FE F BUILDRESS	dison ave		2.3 STREET	ADDRESS	520 Madison Avenue			
cin	- ST-ZIP NEW YO	ORK NY		2. 4 CITY-	ST-ZIP	New York NY 10022			
1111			DELETE	3 1 TITLE		110W 101Ky 111 11 10066		Change	Addition
NAN		JERRY I.		3.2 NAME					
STR		DISON AVE		3.3 STREET	ADDRESS				
CH	/-SI-7IP NEW YO	JHK NY		3.4. CITY-	ST-ZIP				
IIIT		LANDOON	DELETE	4.1 TITLE				Change	Addition
NAN		I, ANDREW		4. 2 NAME					
SIE		DISON AVE		4.3 STREET	ADDRESS				
	-S1-ZIP NEW YO	/NN 1911		4.4 CITY~S	it-zip				
TITL	ALICADI	TEN DAVAD	☐ DELETE	5.1 TITLE				Change	Addition .
NAN	ESO MAN	ien, david Dison ave		5.2 NAME					•
SIR	FET ADDRESS NEW YO			5.3 STREET	ADDRESS				
	- 51 - 211	/NN 111		5.4 CITY - S	it-zip		· · · · · · · · · · · · · · · · · · ·		
TITL			☐ DELETE	6.1 TITLE				Change	Addition
NAN	IE			6.2 NAME					
STR	EET ADORESS			6.3 STREET	ADDRESS				
				I		1			

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:

Andrew J. Nathan, VP

(212) 715 -0300