

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1996.  
AMOUNT DUE ON OR BEFORE 8/9/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 JUN 29 AM 1:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA.

DOCUMENT # P20187

(1)

1. Corporation Name

LEPERCO NET 1 INC.

2ND FILING OF  
THIS REPORT

Principal Place of Business

C/O THE LCP GROUP, LP.  
355 LEXINGTON AVE  
NEW YORK NY 10017

Mailing Address

C/O THE LCP GROUP, LP.  
355 LEXINGTON AVE  
NEW YORK NY 10017

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/22/1988

3a. Date of Last Report

05/01/1994

4. FEI Number

13-3421525

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

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

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

PSD  
ROSKIND, E. ROBERT  
355 LEXINGTON AVE  
N.Y. N.Y.

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

☐ Change ☐ Addition  
500001531225  
-07/06/95--01071--025  
\*\*\*\*\*200.00 \*\*\*\*\*200.00

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VT  
TRIGIANI, ANTONIA G.  
355 LEXINGTON AVE  
N.Y. N.Y.

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

VD  
ROUSE, RICHARD J.  
355 LEXINGTON AVE  
N.Y. N.Y.

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

☐ Change ☐ Addition  
DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

V  
DEBAUN, DENISE E.  
355 LEXINGTON AVE  
N.Y. N.Y.

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

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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

☐ Change ☐ Addition

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 110.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/15/95

(212)692-7200

(Signature #)

CR2E034 (3/95)

2  
P20187

**Lepercq Net 1 Inc.**  
**355 Lexington Avenue, 14th Floor**  
**New York, New York 10017**

June 15, 1995

Ms. Cynthia Hendrixson  
Division of Corporations Annual Reports Section  
P.O. Box 1500]  
Tallahassee, Florida 32302-1500

**RE: Lepercq Net 1 Inc. - Document #P20187 (1)**

Dear Ms. Hendrixson:

Pursuant your instructions in our telecon June 7, 1995, please find enclosed our second filing of the 1995 Florida Corporation Annual Report (hereafter, the "Report") and replacement check #1328 for \$200.00 filing fee for Lepercq Net 1 Inc.

Please recall the following facts from our conversation: we mailed the Report and \$200.00 check on April 13, 1995 (see copies enclosed) in the same envelope as the report and check for Lex GP-2, Inc. (see copies enclosed); your Department processed the Lex GP-2, Inc. report on April 25, 1995; having received no report forms, on March 28, 1995 I called your Department to request two blank Annual Report forms for Lepercq Net 1 Inc. and Lex GP-2, Inc., and subsequently called again because I received only one profit corporation report and the second report was for non-profit corporation; I was advised that a xerox copy of the blank report form could be completed with an original signature and filed without any problems, which I did do. Consequently, you agreed there would be no late penalty required for Lepercq Net 1 Inc.

Should the original Report and check turn up at your Department, please be advised that the original check #1298 should not be processed and that a "stop-payment" has been issued.

Please stamp the duplicate copy of this letter to acknowledge receipt and return it in the stamped, self-addressed envelope provided for your convenience. Should you have any questions, please contact me at (212)692-7248.

Very truly yours,



Dianne R. Smith  
Legal Assistant