FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P23174** **(6)**

1. Corporation Name

MEYERS PARKING SYSTEM, INC.

Principal Place of Business	Mailing Address
200 PARK AVE. -19TH FL NEW YORK NY 10166 US	200 PARK AVE. -19TH FL NEW YORK NY 10166 US

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (30)

3. Date Incorporated or Qualified: **02/27/1989**

3a. Date of Last Report: **05/01/1995**

4. FEI Number: **13-1941419** ☐ 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

9. Name and Address of Current Registered Agent

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

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: _____ DATE

Signature, typed or printed name of registered agent and title if applicable. (Florida Registered Agent signature required when changed.)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	VS	☒ DELETE	1.1 TITLE	VS	☐ Change ☒ Addition
NAME	GERBER, ROGER A.		1.2 NAME	ANTHONY SAYTANIDES	
STREET ADDRESS	26 SAGE TERRACE		1.3 STREET ADDRESS	9 CARSTENSEN ROAD	
CITY-ST-ZIP	SCARSDALE NY		1.4 CITY-ST-ZIP	SCARSDALE, N.Y.	
TITLE	CDP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GORDON, EDWARD S.		2.2 NAME		
STREET ADDRESS	200 E 65TH ST.		2.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	GORDON, ALLAN S.		3.2 NAME		
STREET ADDRESS	50 NORTH STANWICH RD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	GREENWICH CT		3.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	PRAGER, GERALD		4.2 NAME		
STREET ADDRESS	5-7 BRIARCLIFF DR. S.		4.3 STREET ADDRESS		
CITY-ST-ZIP	OSSINING, NY		4.4 CITY-ST-ZIP		
TITLE	T	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	PRAGER, GERALD		5.2 NAME		
STREET ADDRESS	5-7 BRIARCLIFF DR S		5.3 STREET ADDRESS		
CITY-ST-ZIP	OSSINING NY		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

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)(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 added in an attachment with an address.

SIGNATURE: [signature] ANTHONY SAYTANIDES 4/24/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #