

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90092 032 ***150.00

DOCUMENT # P26104

1. Entity Name
FORD MODELS, INC.



Principal Place of Business

111 5TH AVE
9TH FL
NEW YORK, NY 10003 US

Mailing Address

111 5TH AVE
9TH FL
NEW YORK, NY 10003 US

40014543



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01292007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

06-1185749

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME FORD, MARY KATHERINE
STREET ADDRESS 142 GREEN ST.
CITY-ST-ZIP NEW YORK, NY 10012

TITLE V ☐ Delete
NAME FORD, GERARD W., JR.
STREET ADDRESS 1695 SHIPPAN AVE
CITY-ST-ZIP STAMFORD, CT 06902

TITLE M ☐ Delete
NAME CAPLAN, JOHN
STREET ADDRESS 617 WEST END AVENUE
CITY-ST-ZIP NEW YORK, NY 10024

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☒ Change ☐ Addition
NAME FORD, MARY KATHERINE
STREET ADDRESS 111 Fifth Avenue 9th Floor
CITY-ST-ZIP NY NY 10003

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Mary Katherine Ford VP Corporate

1/30/07

Date

2122196500

Daytime Phone #