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

PROFIT CORPORATION ANNUAL REPORT

1998

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

FILED
98 MAY 15 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P27312

1. Corporation Name
Venetia Realty Inc.

Principal Place of Business
One Wall St., 21st Fl.,
New York, NY 10286

Mailing Address
One Wall St., 21st Fl.,
New York, NY 10286

REINSTATEMENT 96-98

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/14/89

2. Principal Place of Business
21 48 Wall St., 16th Fl.,
Suite Apt #, etc
22
City & State
23 New York, NY
Zip
24 10286 | 25 Country

2a. Mailing Address
26 48 Wall St., 16th Fl.,
Suite Apt #, etc
27
City & State
28 New York, NY
Zip
29 10286 | 30 Country

4. FEI Number
13-3545332 | 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ 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)
400002530694--1
83 -05/20/98--01107--004
***1050.00 ***1050.00
84 City FL 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 or 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 board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505 or 607.1508, Florida Statutes.

SIGNATURE: Patrick A. Nolan
Assistant Secretary
DATE 5/13/98

12. OFFICERS AND DIRECTORS

TITLE	PD	☒ DELETE
NAME	Silitch, N. C.	
STREET ADDRESS	One Wall St., New York, NY	
CITY-ST-ZIP		
TITLE	V	☐ DELETE
NAME	Pouch, Richard C.	
STREET ADDRESS	One Wall St.,	
CITY-ST-ZIP	New York, NY	
TITLE	V	☒ DELETE
NAME	Matteo, Joseph P	
STREET ADDRESS	One Wall St.,	
CITY-ST-ZIP	New York, NY	
TITLE	T	☒ DELETE
NAME	Scragg, W. M.	
STREET ADDRESS	One Wall St., New York, NY	
CITY-ST-ZIP		
TITLE	S	☐ DELETE
NAME	McSwiggan, J R.	
STREET ADDRESS	48 Wall St.,	
CITY-ST-ZIP	New York, NY	
TITLE	AS	☒ DELETE
NAME	Stube, Patricia	
STREET ADDRESS	48 Wall St.,	
CITY-ST-ZIP	New York, NY	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☐ Change ☒ Addition
1.2 NAME	Slane, Mark R.	
1.3 STREET ADDRESS	One Wall St., New York, NY	
1.4 CITY-ST-ZIP		
2.1 TITLE	V	☐ Change ☒ Addition
2.2 NAME	Lazar, Dan S.	
2.3 STREET ADDRESS	48 Wall St.,	
2.4 CITY-ST-ZIP	New York, NY	
3.1 TITLE	V	☐ Change ☒ Addition
3.2 NAME	Leary, Joseph F.	
3.3 STREET ADDRESS	48 Wall St.,	
3.4 CITY-ST-ZIP	New York, NY	
4.1 TITLE	D	☐ Change ☒ Addition
4.2 NAME	Kraus, David P.	
4.3 STREET ADDRESS	One Wall St., New York, NY	
4.4 CITY-ST-ZIP		
5.1 TITLE	D	☐ Change ☒ Addition
5.2 NAME	Dietz, Harold F.	
5.3 STREET ADDRESS	One Wall St.,	
5.4 CITY-ST-ZIP	New York, NY	
6.1 TITLE	AS	☐ Change ☒ Addition
6.2 NAME	Meyers, Lisa	
6.3 STREET ADDRESS	48 Wall St.,	
6.4 CITY-ST-ZIP	New York, NY	

14. I hereby certify that the information supplied with this report does not qualify for the exemption stated in Section 119.07(3)(i), 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 12 or Block 13 of this report or supplemental report.

SIGNATURE: Joseph F. Leary Joseph Leary - V.P. 5/5/98 212-495-1881
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/97)