FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

AINI	1996		retary of State OF CORPORA	TIONS			
DOCU 1. Corporat	JMENT # P28	235 (0)				
JV	FLORIDA ONE, INC.	·					
Principal Pla	one of Duninger						
Principal Place of Business Mailing Address					r testitent tim treet tilt i til	BO ATABA DAN DIÐAT DIÐAT	arası didir bibil bibil (CD)
	RD AVENUE DRK NY 10017	730 THIRD AVENU NEW YORK NY 10					
					Date Incorporated or Qualifie	ed 3a. Date of	Last Report
2. Principal	Place of Business	2a. Mailing Address			02/23/1990 4. FEI Number	04	/24/1995
21		26					Applied For
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.			13-3557420		Not Applicable 8.75 Additional
City & Sta	ate	City & State			Certificate of Status Desired	Ь	Fee Required
23		28			 Election Campaign Financing Trust Fund Contribution 		Added to Fee
Zip	Country	Zip	Countr	у	8. This corporation has liability f	or intangible tax ur	Added to Fees
24	25 9. Name and Address of Cu	[29]	30		Florida Statutes	'es 🔀 No	1
	o. Hame and Address of Cu	rrent Registered Agent	81	Name of	10. Name and Address of New	Registered Age	ent
CT C	CORPORATION SYSTEM		01				
1200 S. PINE ISLAND ROAD			82	Street	Address (P.O. Box Number is Not Accept	able)	
	STATION FL 33324		83	,			
			_				
			84	1 '		FL 8	
11. Pursuant or registe	t to the provisions of Sections 607.0	502 and 607.1508, Florida Statu	tes, the above-	named c	orporation submits this statement for the p		its registered office
familiar w	with, and accept the obligations of, S	Bection 607.0505, Florida Statute	zed by the corp s.	oration's	orporation submits this statement for the proporation submits the proporation of directors. I hereby accept the appropriate the proporation of the properties of the propertie	pointment as regi	stered agent. I am
SIGNATURE	Signature, typed or printed name of registered a	·					
12.		AND DIRECTORS	OTE: Registered Age:	nt signature	required when reinstating)	DATE	
TITLE	PD	X) DELETE	1. 1 TITLE		ADDITIONS/CHANGES TO OI	FFICERS AND DIR	
NAME	LEE, J. DANIEL, JR.		1.2 NAME		Peter C. Clapman	L.) 011	ande Di voquiton
STREET ADDRESS	100 HIND ATLING		1.3 STREET	ADDRESS	730 Third Avenue		[8
CITY-ST-ZIP TITLE	NEW YORK NY		1.4 City - S	iT-ZIP	New York, NY 10017		150
NAME	VD ONESO TOTAL	DELETE	2 1 TITLE		PD	[X] Ch	ange Addition
STHEET ADDRESS	SOMERS, JOHN A. 730 THIRD AVENUE		2.2 NAME				
CITY-ST-ZIP	NEW YORK NY		2.3 STREET				
TITLE	S	DELETE	24 CHTY-S 3. 1 TITLE	1 - ZIP			
NAME .	SERLEN, MARK L.	_	3.2 NAME			☐ Chi	ange 🔲 Addition
STREET ADDRESS	730 THIRD AVENUE		3.3 STREET	ADDRESS			
CiTY-ST-ZiP	NEW YORK NY		34 CHY-S	T-ZIP			
TITLE	TD	DELETE	4. 1 TITLE			☐ Cha	ange Addition
NAME STHEET ADDRESS	ADAMSKI, RICHARD J.		4.2 NAME	1			·
CITY-ST-ZIP	730 THIRD AVENUE		4.3 STREET				
TITLE	NEW YORK NY VD	☐ DELETE	4.4 City-St 5. 1 Title	i-ZIP	10		
NAME	JARDINE, JOHN B		5.2 NAME	,	AS Gerard Doherty	<u>[€</u>] Cha	ange 🔀 Addition
STREET ADDRESS	730 THIRD AVE		5.3 STREET /		730 Third Avanue		
CITY-ST-ZIP	NEW YORK NY		54 CITY-SI		New York, New York 10017		
THLE	VD	DELETE	6. 1 TiTLE			Cha	nge Addition
NAME	BULLETT, DAVID B.		6.2 NAME				- Ela.
STREET ADDRESS	730 THIRD AVENUE		6.3 STREET A	ADDRESS			İ
CITY-ST-ZIP	NEW YORK NY v certify that the information supplies		64 CHY-ST	-ZIP			

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)(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 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

4/16/96

(212) 916-4621 Daytime Phone ii