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Apr 30 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # P29013 (0)

1. Corporation Name

NATIONWIDE SHOPPING CENTER, INC

[redacted]

Principal Place of Business	Mailing Address
%PHILIPS INTERNATIONAL 417 FIFTH AVENUE NEW YORK NY 10016	%PHILIPS INTERNATIONAL 417 FIFTH AVENUE NEW YORK NY 10016-2204

3. Date Incorporated or Qualified: 04/23/1990
3a. Date of Last Report: 04/15/1996

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)

4. FEI Number: 13-3544965 ☐ 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

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

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC
1201 HAYES ST.
STE 105
TALLAHASSEE FL 32301

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. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	PILEUSKY, PHILIP		1.2 NAME		
STREET ADDRESS	41 HARBOR VIEW WEST		1.3 STREET ADDRESS		
CITY-ST-ZIP	LAWRENCE NY		1.4 CITY-ST-ZIP		
TITLE	VS	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	MYER, SONDRA		2.2 NAME		
STREET ADDRESS	361 WASTENA TERRACE		2.3 STREET ADDRESS		
CITY-ST-ZIP	RIDGEWOOD N.J. 07450		2.4 CITY-ST-ZIP		
TITLE	AV	☐ DELETE	3.1 TITLE	AV	☒ Change ☐ Addition
NAME	MARRONE, DIANA		3.2 NAME	MARRONE DIANA	
STREET ADDRESS	12-36 ESTATES LANE		3.3 STREET ADDRESS	66 KENT STREET	
CITY-ST-ZIP	DAISIDA NY		3.4 CITY-ST-ZIP	FARMINGDALE NY 11735	
TITLE	VTD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LEVINE, SHEILA		4.2 NAME		
STREET ADDRESS	332 E 84TH ST. #6F		4.3 STREET ADDRESS		
CITY-ST-ZIP	NEW YORK NY		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME	000002163670	
STREET ADDRESS			6.3 STREET ADDRESS	-05/02/97--01061--051	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***165.00	

4/28/97

14. I do hereby certify that the information supplied with this filing 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 on an attachment with an address.

SIGNATURE: [redacted] VICE PRES/SECY 4/28/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #