

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

FILED
Feb 27 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P35503 (2)

1. Corporation Name
DLJ REALTY SERVICES, INC.

Principal Place of Business C/O DLJ INC 277 PARK AVENUE 21ST FLOOR NEW YORK NY 10172 US	Mailing Address C/O DLJ INC 277 PARK AVENUE 21ST FLOOR NEW YORK NY 10172 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 c/o DLJ, Inc. Suite, Apt. #, etc. 22 277 Park Ave., 35th Fl. City & State 23 Zip Country 24 25	2a. Mailing Address 26 c/o DLJ, Inc. Suite, Apt. #, etc. 27 277 Park Ave., 35th Fl. City & State 28 Zip Country 29 30
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3. Date Incorporated or Qualified 09/13/1991	4. FEI Number 13-2791329	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent

**STELNIK, MARK E.
 7900 SW 24TH ST., STE. 102
 DAVIE FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SV WINSTON, JOHN	1.1 TITLE	DP George P. Twill
NAME	277 PARK AVENUE	1.2 NAME	277 Park Avenue
STREET ADDRESS	NEW YORK NY	1.3 STREET ADDRESS	New York, NY 10172
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	SV BERN, CHARLES S.	2.1 TITLE	D/SV Charles S. Bern
NAME	277 PARK AVENUE	2.2 NAME	277 Park Avenue
STREET ADDRESS	NEW YORK NY	2.3 STREET ADDRESS	New York, NY 10172
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V VAKHARIA, RAJ	3.1 TITLE	D/V Rajendra Vakharia
NAME	277 PARK AVENUE	3.2 NAME	277 Park Avenue
STREET ADDRESS	NEW YORK NY	3.3 STREET ADDRESS	New York, NY 10172
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	VP STELNIK, MARK E.	4.1 TITLE	
NAME	277 PARK AVENUE	4.2 NAME	
STREET ADDRESS	NEW YORK NY	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D FLAMBERG, STUART S	5.1 TITLE	Director of Taxes Stuart S. Flamberg
NAME	277 PARK AVENUE	5.2 NAME	277 Park Avenue
STREET ADDRESS	NEW YORK NY	5.3 STREET ADDRESS	New York, NY 10172
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	T COMPETIELLO, MARK A	6.1 TITLE	TX/M Mark A. Competiello
NAME	277 PARK AVENUE	6.2 NAME	277 Park Avenue
STREET ADDRESS	NEW YORK NY	6.3 STREET ADDRESS	New York, NY 10172
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 supplement 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 agent 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 attached sheet with an address.

SIGNATURE:  **Mark A. Competiello**
 Tax Manager **FEB 27 1998** 212-892-4939

CP2E034 (10/97)