

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P37840 (6)

1. Corporation Name

38 EAST CORPORATION



Principal Place of Business

Mailing Address

38 EAST 63RD STREET  
NEW YORK NY 10021

38 EAST 63RD STREET  
NEW YORK NY 10021

3. Date Incorporated or Qualified  
03/10/1992

3a. Date of Last Report  
02/23/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number  
13-3294821

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
110 NORTH MAGNOLIA STREET  
TALLAHASSEE FL 32301

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

Signature typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when incorporating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE  
NAME SLOVIN, BRUCE  
STREET ADDRESS 354 EAST 62ND STREET  
CITY-ST-ZIP NEW YORK NY

TITLE V/C ☒ DELETE  
NAME DRAPKIN, DONALD G.  
STREET ADDRESS 35 EAST 62ND STREET  
CITY-ST-ZIP NEW YORK NY

TITLE VP/S ☐ DELETE  
NAME DICKES, GLENN P  
STREET ADDRESS 38 EAST 63RD STREET  
CITY-ST-ZIP NEW YORK NY

TITLE EVP ☐ DELETE  
NAME ENGELMAN, IRWIN  
STREET ADDRESS 35 EAST 62ND STREET  
CITY-ST-ZIP NEW YORK NY

TITLE CD ☐ DELETE  
NAME PERELMAN, RONALD O.  
STREET ADDRESS 35 EAST 62ND STREET  
CITY-ST-ZIP NEW YORK NY

TITLE D ☐ DELETE  
NAME GITTIS, HOWARD  
STREET ADDRESS 35 EAST 62ND STREET  
CITY-ST-ZIP NEW YORK NY

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

New York, NY 10021

EVP/CFO

New York, NY 10021

COB/CEO/Director

New York, NY 10021

New York, NY 10021

14. 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Glenn Dickes* Glenn Dickes Vice President & Secretary (212) 572-8500 6/25/96  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)