

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

FILED

Apr 02 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P93000009440 (7)

1. Corporation Name

ISLAND LA RAMBLAS ASSOCIATES, INC.

Principal Place of Business

825 EIGHTH AVE  
24TH FLOOR  
NEW YORK NY 10019

Mailing Address

825 EIGHTH AVE  
24TH FLOOR  
NEW YORK NY 10019



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/08/1993

4. FEI Number

58-2035721

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

2. Principal Place of Business

21 4 COLUMBUS CIRCLE

22 Suite, Apt. #, etc.  
5th FL

23 City & State  
NEW YORK, NY

24 Zip  
10019

2a. Mailing Address

26 4 COLUMBUS CIRCLE

27 Suite, Apt. #, etc.  
5th FL

28 City & State  
NEW YORK, NY

29 Zip  
10019

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES INC.  
1201 HAYS ST.  
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 filed applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

DP HART, WENDY  
825 8TH AVE 24TH FL.  
NEW YORK NY 10019

TITLE NAME STREET ADDRESS CITY-ST-ZIP

D MESTEL, LARRY  
825 8TH AVE 24TH FL  
NEW YORK NY 10019

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ST FRIEDMAN, MEG  
825 8TH AVENUE 24 TH  
NEW YORK NY

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

DIRECTOR, PRESIDENT  
WENDY HART  
1330 OCEAN DRIVE 4th FL  
MIAMI FL 33139

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

DIRECTOR  
LAWRENCE MESTEL  
4 COLUMBUS CIRCLE 5th FL  
NEW YORK NY 10019

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

SECRETARY, TREASURER  
MEG FRIEDMAN  
4 COLUMBUS CIRCLE 5th FL  
NEW YORK, NY 10019

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

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 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

Meg Friedman

3/12/98

CR2E034 (10/97)