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

**PROFIT** CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000051941 (1)

SAN MARINO REAL ESTATE INVESTMENT CORP.

Principal Place of Business Mailing Address 524 BROADWAY 524 BROADWAY SUITE 404 SUITE 404 DO NOT WRITE IN THIS SPACE NEW YORK NY 10012 NEW YORK NY 10012 3. Date Incorporated or Qualified 07/26/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 13-3726552 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country 8. This corporation owes or has paid the current year Intangible 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY 1201 HAYS STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301-2525 83 84 City Zip Code 85 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 State change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1097 12. OFFICERS AND DIRECTORS 13. TITLE ☐ DELETE 11 TITLE Change Addition BRUNEL, ARNAUD NAME 1.2 NAME % 1501 - 3RD AVENUE, 4TH FLOOR 13 STREET ADDRESS STREET ADDRESS **NEW YORK NY 10028** CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2 1 HILE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 31 TITLE TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS

CITY-ST-ZIF 14. Thereby certify that the information supplied with this filing closs 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 employeed 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 allachard with an address

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5 3 STREET ADDRESS

5.4 CITY - ST - ZIP

44 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

51 TITLE 52 NAME

61 TITLE

6.2 NAME

DELETE

DELFTE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

NAME

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Addition

Change

FILED

Feb 10 1998 8:00am

Secretary of State