

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR 11 PM 8:11

DOCUMENT # P94000030278 (3)

1. Corporation Name

SUNBIRD REALTY, INC.

Principal Place of Business

**C/O LOEB BLOCK & WACKSMAN
505 PARK AVENUE
NEW YORK NY 10022**

Mailing Address

**C/O LOEB BLOCK & WACKSMAN
505 PARK AVENUE
NEW YORK NY 10022**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/21/1994

3a. Date of Last Report

4. FEI Number

59-3238744

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**

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NATIONAL CORPORATE RESEARCH, LTD., INC.
1406 HAYS STREET, SUITE 2
TALLAHASSEE FL 32301**

81. Name

Bloom, Leonard H.

82. Street Address (P.O. Box Number is Not Acceptable)

1101 Brickell Avenue

83

Suite 1400

84

City

Miami

FL

85

Zip Code

33131

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

Leonard H. Bloom

Leonard H. Bloom

4/3/95

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **Director/President**
NAME **Howard Berke**
STREET ADDRESS **505 Park Avenue, 9th Floor**
CITY-ST-ZIP **New York, New York 10022**

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

TITLE **Director/Treasurer**
NAME **Jeffrey E. Wacksman**
STREET ADDRESS **505 Park Avenue, 9th Floor**
CITY-ST-ZIP **10022**

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

TITLE **Director/Secretary**
NAME **William Merker**
STREET ADDRESS **505 Park Avenue, 9th Floor**
CITY-ST-ZIP **New York, New York 10022**

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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 110.07(3)(k), Florida Statutes. I further certify that the information included 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Merker, Secretary 3/20/95

212 755-5510