

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

FILED
Apr 20 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 # 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

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

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 SHAPO, FREEDMAN & BLOOM
Suite, Apt. #, etc.

26 Loeb, Block & Partners LLP
Suite, Apt. #, etc.

22 200 SOUTH BISCAYNE, STE. 4750

27 505 Park Avenue 9th floor

City & State

City & State

23 MIAMI, FLORIDA

28 New York, NY

Zip

Country

Zip

Country

24 33131

25

29 10022

30

9. Name and Address of Current Registered Agent

BLOOM, LEONARD H
1101 BRICKELL AVENUE
SUITE 1400
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

SOUTH FLORIDA RESIDENT AGENTS, INC.

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

First Union Financial Center

83

Suite 4750, 200 South Biscayne Boulevard

84 City

Miami

85 Zip Code

FL 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

Signature, typed or printed name of registered agent, if applicable

(Note: Registered Agent signature required when resigning)

LEONARD H. BLOOM, V/S

4/15/98

DATE

12. OFFICERS AND DIRECTORS

TITLE DP
NAME BERKE, HOWARD
STREET ADDRESS 505 PARK AVENUE, 9TH FLOOR
CITY-ST-ZIP NEW YORK NE ☐ DELETE

TITLE DT
NAME WACKSMAN, JEFFREY E
STREET ADDRESS 505 PARK AVENUE, 9TH FLOOR
CITY-ST-ZIP NEW YORK NE ☐ DELETE

TITLE DS
NAME MERKER, WILLIAM
STREET ADDRESS 505 PARK AVENUE, 9TH FLOOR
CITY-ST-ZIP NEW YORK NE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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 amendment with an address.

SIGNATURE

Leonard H. Bloom

Leonard H. Bloom, V/S

212-755-5570

CR2E034 (10/97)