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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000072577 (5)

DELMA REALTY SERVICES, INC.

FILED Apr 24 1997 8:00am Secretary of State



Principal Place of Business 545 MADISON AVENUE 17TH FLOOR NEW YORK NY 10022		545 MADISON A' 17TH FLOOR	Mailing Address 545 MADISON AVENUE 17TH FLOOR NEW YORK NY 10022-4218			3. Date of Last Report		
						3. Date Incorporated or Qualified 08/30/1996	,	
— '	I Flace of Business	2a. Mailing Addre	ess			4. FEI Number 59-3400007	Applied F Not Appl	
21 Suite, Ap 22	pt. #, etc.	Suite, Apt #,	etc.			5. Certificate of Status Desired	\$8.75 Addition	onat
City & St	itate	City & State				6. Election Campaign Financing	\$5.00 May 8	Be
23		28		Carrote		Trust Fund Contribution	Added to Fee	
7m	Country 25	Zip 29	30	Country		8. This corporation has liability for intangible Florida Statutes Yes	-)32,
	9. Name and Address of Cu		1901		···	10. Name and Address of New Registered A		
	RANCIS, ROBERT A JR.			81	Name			
	00 2ND AVENUE SOUTH			82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
	Buite 2018 Bt. Petersburg FL 33701							
0	oi. PEIEnobung FL 33/01			83				
				84	City	FL	85 Zip Code	
SIGNATURI 12. THEF NAME STREET ADDRES	I am familiar with, and accept the o	obligations of, Section 607. In agent and tile if applicable S AND DIRECTORS	0505, Florida (NOTE Regi	Statutes	ni signalure re	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appropriate of the purpose of ration's board of directors. I hereby accept the appropriate of the purpose of ration's board of directors. I hereby accept the appropriate of the purpose of t	DIRECTORS IN 1	
City-S1-ZiP	NEW YORK NY 10022		•	14 CITY-S	T-ZIP [I	NEW YORK, NY 10022		
TITLE		☐ DE	LETE	2.1 TITLE		S	Change A	Addition
NAME				2.2 NAME	ार्	OROYAU, SETA 545 MADISON AVE 217HT200R		
STREET ADDRES	95		i :	2.3 STREET	ADDRESS			
CHY-SI-ZIP								
		□ DE		2. 4 CITY-1	ST-ZUP P	NEW YORK, NY 1002Z	Change	Addition
NAME		DE 🗆	LETE	2. 4 CITY - 1 3.1 TITLE 3.2 NAME	51-24P [Change A	Addition
	ss	DE	LETE	3.1 TITLE			Change	Addition
NAME	\$5	□ DE	LETE	3.1 TITLE 3.2 NAME	ADDRESS		Change #	Addition
NAME STREET ADDRES	ss	DE	LETE	3.1 TITLE 3.2 NAME 3.3 STREET	ADDRESS	NEW YORK, NY 10022		Addition Addition
NAME STREET ADDRES CITY+ST_ZIP	58		LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4. CITY - 1	ADDRESS	NEW YORK, NY 10022		
NAME STREET ADDRES CITY ST. ZIP THEE			LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4. CITY-1 4.1 TITLE	ADDRESS ST-ZIP	NEW YORK, NY 10022		
NAME STREET ADDRES CITY ST ZIP TITLE NAME STREET ADDRES CITY ST ZIP		□ DE	LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5	ADDRESS ST-ZIP ADDRESS	NEW YORK, NY 10022	Change A	Addition
NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE			LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE	ADDRESS ST-ZIP ADDRESS	NEW YORK, NY 10022	Change A	
NAME STREET ADDRES CITY-ST-ZIP THEF NAME STREET ADDRES CITY-ST-ZIP THEE NAME	s:	□ DE	LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME	ADDRESS ST- ZIP ADDRESS T- ZIP	NEW YORK, NY 10022	Change A	Addition
NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES TITLE NAME STREET ADDRES STREET ADDRES	s:	□ DE	LETE LETE	3.1 TILE 3.2 NAME 3.3 STREET 3.4 CITY - 5 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY - 5 5.1 TITLE 5.2 NAME 5.3 STREET	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	NEW YORK, NY 10022	Change A	Addition
NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES TITLE NAME STREET ADDRES CITY-ST-ZIP	s:	☐ DE	LETE	3.1 TILE 3.2 NAME 3.3 STREET 3.4 CITY - 5 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY - 5 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY - 5	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	NEW YORK, NY 1002Z	Change A	Addition Addition
NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE LITY-ST-ZIP TITLE LITY-ST-ZIP TITLE	s:	□ DE	LETE LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-5 6.1 TITLE	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS ADDRESS	NEW YORK, NY 1002Z	Change A	Addition
NAME STREET ADDRES CITY STORE THEF NAME STREET ADDRES CITY STORE NAME STREET ADDRES CITY STORE NAME STREET ADDRES CITY STORE THE NAME NAME	22. S2.	☐ DE	LETE LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-! 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	NEW YORK, NY 1002Z	Change A	Addition Addition
NAME STREET ADDRES CITY STIZE THEF NAME STREET ADDRES CITY STIZE NAME STREET ADDRES CITY STIZE NAME STREET ADDRES CITY STIZE LITE	22. S2.	☐ DE	LETE LETE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-1 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-5 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-5 6.1 TITLE	ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	NEW YORK, NY 1002Z	Change A	Addition Addition

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 it made under oath; that I am an officer or director of the corporation of 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: