FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION May 01 1998 8:00am Sandra B. Mortham ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** Secretary of State (1)DOCUMENT # \$82796 **36 STREET ASSOCIATES, INC.** Principal Place of Business Mailing Address 1111 KANE CONCOURSE, SUITE 400 SAKOWITZ. ALAN BAY HARBOR ISLANDS FL 33154 111 KANE CONCOURSE STE 401 BAY HARBOR ISLANDS FL 33154 3g. Date of Last Report 3. Date incorporated or Qualified 09/26/1991 04/25/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For IIII KANE CONCOURSE 65-0300616 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Added to Fees 28 Trust Fund Contribution Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, 24 ☐ Yes ☐ No 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent SAKOWITZ, ALAN Name 1111 KANE CONCOURSE, SUITE 401 Street Address (P.O. Box Number is Not Acceptable) 82 **BAY HARBOR ISLANDS FL 33154** 83 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. 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE Change 1.1 TITLE Addition GREENBOIM, YEHESKEL NAME 1.2 NAME 1111 KANE CONCOURSE, SUITE 400 STREET ADDRESS 1.3 STREET ADDRESS **BAY HARBOR ISLANDS FL 33154** CITY-ST-ZIP 1.4 CITY - ST - ZIP ☐ DELETE TITLE 2.1 TITLE Change Addition GREENBOIM, ABRAHAM MALE 2.2 NAME 1111 KANE CONCOURSE STE 400 STREET ADDRESS 2.3 STREET ADDRESS **BAY HARBOR ISLANDS FL** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE TITLE Change ☐ Addition 3.1 TITLE NALEE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition 5.1 TITLE NALIF 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST - ZIP 3000025099230 00000 -05/04/98--01097--000 ***150.00 TITLE DELETE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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.