

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000000559

**FILED**  
**Jan 09, 2014**  
**Secretary of State**  
**CC7661614609**

**Entity Name:** PERKINS EASTMAN ARCHITECTS PC

**Current Principal Place of Business:**

115 FIFTH AVENUE  
3RD FLOOR  
NEW YORK, NY 10003

**Current Mailing Address:**

115 FIFTH AVENUE  
3RD FLOOR  
NEW YORK, NY 10003

**FEI Number:** 13-3044005

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            CEO / CHAIRMAN  
Name            PERKINS, LAWRENCE B  
Address        FOUR RECTORY LANE  
City-State-Zip: SCARSDALE NY 10583

Title            VPS  
Name            EASTMAN, MARY-JEAN  
Address        2 NORTHSIDE PIERS, 24M  
City-State-Zip: BROOKLYN NY 15905

Title            PRESIDENT  
Name            HOGLUND, JOHN D  
Address        265 ORCHARD DRIVE  
City-State-Zip: PITTSBURGH PA 15228

Title            VP  
Name            SCHWARTZ, AARON B  
Address        326 W. 22ND STREET  
City-State-Zip: NEW YORK NY 10011

Title            VP  
Name            STARK, JONATHAN N  
Address        77 SEVENTH AVENUE  
City-State-Zip: NEW YORK NY 10011

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** PERKINS, LAWRENCE B.

**CEO / CHAIRMAN**

**01/09/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date