

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

APPROVED AND FILED

57 MAY - 1 1994

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
Office of the Secretary of State

DOCUMENT # P23628 (1)
1. Corporation Name:
ELMSFORD CORAL SQUARE CORP.

DO NOT WRITE IN THIS SPACE

Principal Place of Business: **% ROBERT MARTIN COMPANY
100 CLEARBROOK RD
ELMSFORD NY 10523**

Mailing Address: **% ROBERT MARTIN COMPANY
100 CLEARBROOK RD
ELMSFORD NY 10523**

3. Date Incorporated or Qualified: **03/29/1989**

3a. Date of Last Report: **04/22/1994**

4. FEI Number: **13-3506968**

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 has liability for intangible tax under S. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **21**

2a. Mailing Address: **26**

22. State Apt # etc: **27**

23. City & State: **28**

24. Zip: **25** Country: **29** Country: **30**

9. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** **85 Zip Code**

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 607.0501, Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: D	NAME: BERGER, MARTIN S. STREET ADDRESS: 100 CLEARBROOK ROAD CITY, ST, ZIP: ELMSFORD NY	11 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: CD	NAME: WEINBERG, ROBERT F. STREET ADDRESS: 100 CLEARBROOK ROAD CITY, ST, ZIP: ELMSFORD NY	12 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: VS	NAME: ROOS, LLOYD I. STREET ADDRESS: 100 CLEARBROOK ROAD CITY, ST, ZIP: ELMSFORD NY	13 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: P	NAME: BERGER, BRAD W. STREET ADDRESS: 100 CLEARBROOK ROAD CITY, ST, ZIP: ELMSFORD NY	14 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE: V	NAME: JONES, TIM M STREET ADDRESS: 100 CLEARBROOK ROAD CITY, ST, ZIP: ELMSFORD NY	15 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE:	NAME:	16 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE:	NAME:	17 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	

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 199.07(4)(b), Florida Statutes. I further certify that the information submitted on this filing is not requested or supplied in confidence and is not confidential 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 and changes appear in Block 13 with an address.

SIGNATURE: **MARTIN BERGER** 4-26-95 (914) 592-4800

SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR