2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2006 8:00 am Secretary of State

DOCUI 1. Entity Nam GROW.NI		5240				04-17-200		043 ***1.	50.00	
Principal Place of Business 386 PARK AVENUE SOUTH, 15TH FLOOR NEW YORK, NY 10016 Address 1221 AVE OF THE AMER TAX DEPT - 48TH FLR NEW YORK, NY 10020-1					,	4005153 ²				
	lace of Business ENN PLAZA	3. Mailing Address	Mailing Address					Liide india elek edil		
Suite, Apt. #, etc. FLOOR		Suite, Apt. #, etc.		04072006	Chg-P	CR2E	034 (11/05)			
City & State NEW YORK NY		City & State				4. FEI Number Applied For 13-4106860 Not Applicable				
Zio	21 Country	Zip	Cour	ntry	5. Certificate	of Status Desired		\$8.75 Add Fee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent						
				Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525				Street Address (P.O. Box Number is Not Acceptable)						
				City			F	Zip Code		
The above named entity submits this statement for the purpose of changing its re-				ļ	stered agent, or both	n, in the State of F		<u> </u>	and accept	
	ions of registered agent.		3		•					
SIGNATURE_	Signature, typed or printed name of registered agen	Lond title dispolarible (NO)	C Besiden	od Appet sippathus can	uired when reinstating)	<u>-</u>	DATE			
	Signature, typed or printed name or registered agent	cand little if applicable. (NO	c: negistere	od Agent signature red	ulired witers reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 9. Election Campaign After May 1, 2006 Fee will be \$550.00 Trust Fund Contrib					\$5.00 May Be Added to Fees			: .		
10. OFFICERS AND DIRECTORS			11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11					
TITLE	☐ Delete		πtι	.E		,	. , ,	Change	Addition	
NAME	MALASPINA, MARK			AE						
STREET ADDRESS				EET ADDRESS						
CITY-ST-ZIP	NEW YORK, NY 10016			1-ST-ZIP						
TITLE	VP Delete		τιπ					☐ Change	Addition	
NAME	KAUFMAN, FRANK			AE						
STREET ADDRESS 1221 AVENUE OF THE AMERICAS- 48TH FL. CITY-ST-ZIP NEW YORK, NY 10020				EET AODRESS Y-ST-ZIP						
TITLE	S Delete		TITL	E		•		☐ Change	☐ Addition	
NAME	GUETTA, DANIEL			AE I					_	
STREET ADDRESS 1221 AVENUE OF THE AMERICAS- 48TH FL.			STR	EET ADDRESS						
CITY-ST-ZIP NEW YORK, NY 10020			CIT	Y-ST-ZIP						
TITLE	Т	☐ Delete	TITE	£				☐ Change	☐ Addition	
NILLE .	SELBY THOMAS		SIAA	. I				•		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 coforation or the receiver or to stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

City-St-2iP

TITLE

NAME

TITLE

NAME STREET ADDRESS

☐ Detete

Delete

1221 AVENUE OF THE AMERICAS- 48TH FL.

NEW YORK, NY 10020

HIRSCHBERG, HENRY

NEW YORK, NY 10121

MICALLEF, JOSEPH

NEW YORK, NY 10121

2 PENN PLAZA-12TH FLOOR

2 PENN PLAZA-12TH FLOOR

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

VC.

CITY-ST-ZIP

TITLE

NAME

TITLE

Frank J. Kaufman PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

212 512 4362

☐ Change

☐ Change

Addition

■ Addition