


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P02000067598

1. Entity Name
NEW YORKER 57 CORP.



Principal Place of Business Mailing Address

2055 ROCKLEDGE DRIVE 2055 ROCKLEDGE DRIVE
 ROCKLEDGE, FL 32955 US ROCKLEDGE, FL 32955 US

DO NOT WRITE IN THIS SPACE



04012008 No Chg-P CR2E034 (11/05)

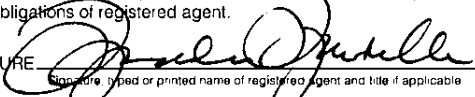
4. FEI Number 54-2065126	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MARTELLI, MARCO
 2055 ROCKLEDGE DRIVE
 ROCKLEDGE, FL 32955

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  DATE: **4/1/08**

Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MARTELLI, MARCO
STREET ADDRESS	2055 ROCKLEDGE DRIVE
CITY-ST-ZIP	ROCKLEDGE, FL 32955
TITLE	D
NAME	MARTELLI, MADELINE
STREET ADDRESS	2055 ROCKLEDGE DRIVE
CITY-ST-ZIP	ROCKLEDGE, FL 32955
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 05/21/08-80098-025-158.75

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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **MADLINE MARTELLI** **4/1/08** **917 2395887**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #