

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P02000067598

FILED  
Apr 28, 2003  
Secretary of State

Entity Name: NEW YORKER 51 CORP.

**Current Principal Place of Business:**

2055 ROCKLEDGE DRIVE  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

2055 ROCKLEDGE DRIVE  
ROCKLEDGE, FL 32955

**New Mailing Address:**

FEI Number: 54-2065126

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARTELLI, MARCO  
2055 ROCKLEDGE DRIVE  
ROCKLEDGE, FL 32955

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MARTELLI, MARCO  
Address: 2055 ROCKLEDGE DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: MARTELLI, MADELINE  
Address: 2055 ROCKLEDGE DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARCO MARTELLI

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04/28/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date