

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 23, 2005 8:00 am**  
**Secretary of State**

03-23-2005 90026 043 \*\*\*158.75

DOCUMENT # P96000006891

1. Entity Name  
SIX-TWENTY, INC.



Principal Place of Business  
103 GREENE STREET  
NEW YORK, NY 10012

Mailing Address  
103 GREENE STREET  
NEW YORK, NY 10012

40036308



02242005 Chg-P CR2E034 (10/03)

2. Principal Place of Business

804 Ocean Drive

3. Mailing Address

804 Ocean Drive

Suite, Apt. #, etc.  
2nd Floor

Suite, Apt. #, etc.  
2nd Floor

City & State  
Miami Beach, Florida

City & State  
Miami Beach, Florida

Zip  
33139

Country  
Miami-Dade

Zip  
33139

Country  
Miami-Dade

4. FEI Number  
65-0663225

Applied For  
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVINSON, EDWARD E  
407 LINCOLN ROAD  
PH-SE  
MIAMI BEACH, FL 33139

7. Name and Address of New Registered Agent

Name  
Marlo Courtney  
Street Address (P.O. Box Number is Not Acceptable)  
804 Ocean Drive - 2nd Floor  
Miami Beach, Florida 33139  
City FL Zip Code

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

Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME GOLDMAN, R. ANTHONY  
STREET ADDRESS 103 GREENE STREET  
CITY-ST-ZIP NEW YORK, NY 10012 ☐ Delete

TITLE SD  
NAME GOLDMAN, JESSICA  
STREET ADDRESS 103 GREENE ST  
CITY-ST-ZIP NEW YORK, NY 10012 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☒ Change ☐ Addition  
NAME GOLDMAN, R. ANTHONY  
STREET ADDRESS 804 OCEAN DRIVE - 2ND FLOOR  
CITY-ST-ZIP MIAMI BEACH, FL 33139

TITLE SD ☒ Change ☐ Addition  
NAME SREBNICK, JESSICA GOLDMAN  
STREET ADDRESS 804 Ocean Drive - 2nd Floor  
CITY-ST-ZIP Miami Beach, Florida 33139

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/16/05 (305) 531-4411