

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F16000005661

Entity Name: INFINITY CONSULTING SOLUTIONS OF NEW YORK, INC.**Current Principal Place of Business:**462 7TH AVE
2ND FLOOR
NEW YORK, NY 10018**Current Mailing Address:**462 7TH AVE
2ND FLOOR
NEW YORK, NY 10018 US**FEI Number:** 13-4191777**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*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**Officer/Director Detail :**

| | |
|-----------------|--------------------------|
| Title | CFO |
| Name | GESUALDI, DAVID |
| Address | 462 7TH AVE 2ND FLOOR |
| City-State-Zip: | NEW YORK NY 10018 |

| | |
|-----------------|--------------------------|
| Title | DIRECTOR |
| Name | KLARES, DOUGLAS |
| Address | 462 7TH AVE 2ND FLOOR |
| City-State-Zip: | NEW YORK NY 10018 |

| | |
|-----------------|--------------------------|
| Title | DIRECTOR |
| Name | WALDEN, MATTHEW |
| Address | 462 7TH AVE 2ND FLOOR |
| City-State-Zip: | NEW YORK NY 10018 |

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|-----------------|--------------------------|
| Title | DIRECTOR |
| Name | PFENNIG, MATTHEW |
| Address | 462 7TH AVE 2ND FLOOR |
| City-State-Zip: | NEW YORK NY 10018 |

I hereby 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 all other like empowered.

SIGNATURE: DAVID GESUALDI

CFO

04/16/2024

Electronic Signature of Signing Officer/Director Detail_____
Date