

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P12057

**Entity Name:** DESMAN, INC.

**Current Principal Place of Business:**

49 WEST 37TH ST.  
5TH FLOOR  
NEW YORK, NY 10018

**Current Mailing Address:**

49 WEST 37TH ST.  
5TH FLOOR  
NEW YORK, NY 10018

**FEI Number:** 11-2709775

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S. 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 SD  
Name FUJIWARA, JOHN Y  
Address 6 YORKRIDGECT  
City-State-Zip: LAS VEGAS NV 89052

Title PDT  
Name CHHABRA, GIRDHARI L  
Address 33 STERLING LANE  
City-State-Zip: SANDSPOINT NY 11050

Title VD  
Name CHHABRA, ANUP  
Address 90 STATION ROAD  
City-State-Zip: GREAT NECK NY 11023

Title PD  
Name REBORA, STEPHEN  
Address 20 N. CLARK STREET, 4TH FLR  
City-State-Zip: CHICAGO IL 60602

Title V  
Name TRACY, TIMOTHY  
Address 49 WEST 37TH STREET, 5TH FLR  
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:** ANUP CHHABRA

CFO/VP

02/01/2016

Electronic Signature of Signing Officer/Director Detail

Date