2006 FOR PROFIT CORPORÁTIÓN **ANNUAL REPORT**

DOCUMENT #490465

1. Entity Name NEW YORKERS ANONYMOUS, INC.

FILED Feb 08, 2006 08:00 AM Secretary of State

Principal Place of Business C/O DAVID WEISS 1541 BRICKELL AVENUE, SUITE 3405 MIAMI, FL 33129 US

Mailing Address C/O DAVID WEISS 1541 BRICKELL AVENUE, SUITE 3405 MIAMI, FL 33129 US



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		ÈE	01252006	No Chg-P	CR2E034 (11/05)
		<i>-</i>	4. FEI Numbe 59-1636		Applied For Not Applicable
		CONTROL OF	5. Certificate	of Status Desired	\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent					
WEISS, DAVID 1541 BRICKELL AVENUE SUITE 3405 MIAMI, FL 33129		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					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.		5.00 May Be ided to Fees		
10. OFFICERS AND DIRECTORS					
ITILE PD NAME WEISS, DAVID I. STREET ADDRESS CITY-ST-ZIP MIAMI, FL					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				.0000004 02/18/05-6	125502 30098-023 150.00
TITLE NAME		•	** *		
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I hereby certify that the information supplied with this fil	ing does not qualify for the even	natione contains	of in Chanter 110	Figure District	

thereby certify that the information supplied with this tilling 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 AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR SIGNATURE: ~