

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 683276

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** SEVEN FORTY CENTRAL CORP.

**Current Principal Place of Business:**

740 ALTON RD  
MIAMI BEACH, FL 33139

**New Principal Place of Business:**

**Current Mailing Address:**

740 ALTON RD  
MIAMI BEACH, FL 33139

**New Mailing Address:**

**FEI Number:** 59-2060885

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROTH, ANDREW  
740 ALTON RD  
MIAMI BCH., FL 33139 US

**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  
Name: ALTINISKISIK, ALI  
Address: 740 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL

Title: D  
Name: DUBLINSKI, LEIBEL  
Address: 740 ALTON RD  
City-St-Zip: MIAMI BCH, FL 33139

Title: D  
Name: ZILBERBERG, SEYMON  
Address: 740 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL

Title: PD  
Name: SHVARTSMAN, BORIS  
Address: 740 ALTON RD.  
City-St-Zip: MIAMI BEACH, FL

Title: VPD  
Name: ROTH, ANDREW  
Address: 740 ALTON ROAD  
City-St-Zip: MIAMI BEACH, FL

Title: DST  
Name: AROCH, HEUDA  
Address: 740 ALTON RD  
City-St-Zip: MIAMI BEACH, FL 33139

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:** BORIS SHVARTSMAN

PRES

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date