

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90108 021 ***150.00

DOCUMENT # 833222

1. Entity Name
SYSKA HENNESSY GROUP, INC.



Principal Place of Business
11 WEST 42ND STREET
NEW YORK, NY 10036

Mailing Address
11 WEST 42ND STREET
NEW YORK, NY 10036

60012006



01262007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-1576976

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO MAGLIANO, JOHN V 11 W 42ND ST NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GOLDMAN, HARVEY 11 WEST 42ND ST NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD FINCHER, RICHARD 11 WEST 42ND STREET NEW YORK NEW YORK, 10036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CFO DUSCANI, ROBERT 11 WEST 42ND STREET NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ANDERSON, JOHN 11 WEST 42ND STREET NEW YORK, NY 10036
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard A Fincher

1-29-07

Date

212-556-3360

Daytime Phone #