## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000000752

Entity Name: THE CANTOR SEINUK GROUP, INC.

FILED Jan 06, 2006 Secretary of State

	Current Principal Place of Business:			New Principal Place of Business:		
228 EAST	45TH STREET	Γ				
	RK, NY 100173	303				
Current Mailing Address:			New Mailir	New Mailing Address:		
3RD FLO	- 45TH STREE OR RK, NY 100173					
FEI Number	r: 13-2728400	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Certificate of Status Desired ( )		
Name and	d Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
DELASTE 1450 BRIC MIAMI, FL	CKELL BAY DR	IVE				
	e named entity : e of Florida.	submits this statement for the	purpose of changing it	s registered office or registered agent, or both,		
SIGNATU	RE:					
	Electror	ic Signature of Registered Ag	ent	Date		
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title:						
Name: Address:	CEO ( ) MARCUS, SILV 6 SUNSET CIR HASTINGS-ON	CLE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Name: Address: City-St-Zip: Title: Name: Address:	MARCUS, SILV 6 SUNSET CIR HASTINGS-ON	IAN CLE HUDSON, NY I Delete MAD ., APT. 45N	Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition		
Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	MARCUS, SILV 6 SUNSET CIR HASTINGS-ON- PRES ( RAHIMIAN, AHI 330 E 38TH ST NEW YORK, N	IAN CLE HUDSON, NY Delete MAD ,, APT. 45N Y 10016 Delete	Name: Address: City-St-Zip: Title: Name: Address:			
Name: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: City-St-Zip: City-St-Zip: City-St-Zip:	MARCUS, SILV 6 SUNSET CIR HASTINGS-ON- PRES ( RAHIMIAN, AHI 330 E 38TH ST NEW YORK, N' EXVP ( SMILOW, JEFF 50 REGENT ST BERGENFIELD	IAN CLE HUDSON, NY Delete AAD ., APT. 45N Y 10016 Delete ., NJ 07621 Delete ARAN AVENUE	Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE:	DAVID FREEDMAN	CFO	01/06/2006