


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 21, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F01000003090</b> 1. Entity Name <b>CEVENNA HOLDINGS INC.</b>	
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Principal Place of Business <b>C/O BLOOM HOCHBERG &amp; CO. 450 SEVENTH AVENUE NEW YORK, NY 10123</b>	Mailing Address <b>C/O BLOOM HOCHBERG &amp; CO. 450 SEVENTH AVENUE NEW YORK, NY 10123</b>
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01042005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>13-3435405</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
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6. Name and Address of Current Registered Agent  <b>SISSON, LARRY C/O A1A FLORIDA CORPORATE SERVICES 218 SOUTHERN COUNTRY LANE QUINCY, FL 32351</b>
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD BAKER, EDWIN 250 PARK AVENUE NEW YORK, NY 10177
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PORETSKY, JOEL 405 LEXINGTON AVENUE NEW YORK, NY 10174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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<p>UP00000236988 02/21/05-80037-017 150.00</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Joel Poretsky Vice President 2/15/05 212-704-6285  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #