

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90003 027 \*\*\*150.00

**DOCUMENT # F03000004500**

1. Entity Name

MIC-USA INC. OF N.Y.



Principal Place of Business

1466 LANTANA DRIVE  
WESTON, FL 33326

Mailing Address

153 EAST 53RD STREET, SUITE 5900  
NEW YORK, NY 10022

**54006924**



01052004 No Chg-P CR2E034 (10/03)

4. FEI Number

13-3746390

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE IN THIS SPACE**

**6. Name and Address of Current Registered Agent**

ZANOTTI, MARIO  
1466 LANTANA DRIVE  
WESTON, FL 33326

**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

*Jan 08, 2004*

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**10. OFFICERS AND DIRECTORS**

TITLE C  
NAME LEDIN, HAKAN  
STREET ADDRESS 153 E. 53RD STREET, SUITE 5900  
CITY-ST-ZIP NEW YORK, NY 10022

TITLE S  
NAME GUBAR, LEONARD  
STREET ADDRESS 1251 AVENUE OF THE AMERICAS 29TH FLOOR  
CITY-ST-ZIP NEW YORK, NY 10020

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 exemption stated in Section 119.07(3)(i), 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

Date

Daytime Phone #

*Leonard Gubar, Sec*  
*02/05/04*

*212 702 4560*