2006 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 04, 2006 08:00 Al Secretary of State DOCUMENT # F04000000769 PETRY HOLDING INC. Mailing Address Principal Place of Business 3 EAST 54TH ST. **500 WEST CYPRESS CREEK RD** FORT LAUDERDALE, FL NEW YORK, NY 10022 06082006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0232112 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE **BUSINESS FILINGS INCORPORATED** 1203 GOVERNORS SQUARE BLVD SUITE 101 IN THIS SPACE TALLAHASSEE, FL 32301-2960 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 agristure required when registaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. CEO TITLE MCAULIFF, TIMOTHY NAME 3 EAST 54TH STREET STREET ADDRESS CITY-ST-7IP NEW YORK, NY 10022 : U00000573296 TITLE VP/C 08/04/06-80001-003:150:00 LEMON, WILSON JR NAME 3 EAST 54TH STREET STREET ADDRESS CITY-ST-ZIP NEW YORK, NY 10022 TITLE NAME STREET ADDRESS DO NOT WRITE CHY-ST-7P IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby 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 execuse 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 life

SIGNATURE: WILSON LEMON, JR

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/31/06 212-230-5702

FILED