


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F04000000769</b> 1. Entity Name <b>PETRY HOLDING INC.</b>	
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Principal Place of Business <b>500 WEST CYPRESS CREEK RD FORT LAUDERDALE, FL</b>	Mailing Address <b>3 EAST 54TH ST. NEW YORK, NY 10022</b>
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04202007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>20-0232112</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fees Required
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6. Name and Address of Current Registered Agent  <b>BUSINESS FILINGS INCORPORATED 1203 GOVERNORS SQUARE BLVD SUITE 101 TALLAHASSEE, FL 32301-2960</b>	<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 obligation.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MCAULIFF, TIMOTHY 3 EAST 54TH STREET NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/C LEMON, WILSON JR 3 EAST 54TH STREET NEW YORK, NY 10022
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05/07/07-80001-021 150.00

**DO NOT WRITE  
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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: Walter R. Smith 4/20/07 212-230-5707  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #