


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 20, 2007 08:00 AM
Secretary of State

DOCUMENT # F05000004611 1. Entity Name MANHATTAN STUDIO ARCHITECTURE & DESIGN, P.C.	
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Principal Place of Business 200 SOUTH BISCAYNE BLVD. SUITE 350 MIAMI, FL 33131	Mailing Address 41 WEST 25TH STREET NEW YORK, NY 10010
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DO NOT WRITE IN THIS SPACE



02212007 No Chg-P CR2E034 (11/05)

4. FEI Number 13-3794640	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**TATUM, THOMAS R ESQ.
200 SOUTH BISCAYNE BLVD.
SUITE 350
MIAMI, FL 33131**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP *	P SHUNICK, GREGORY 235 WEST 56TH STREET #15M NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VICINANZO, PETER 123 HARBOR DRIVE #402 STAMFORD, CT 06902
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JENSEN, PETER 94 ST. JAMES PLACE BROOKLYN, NY 11214
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SELFRIDGE, DONNA 8122 17TH AVE. BROOKLYN, NY 11214
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D VENJOHN, RODNEY 143 GARDEN STREET GARDEN CITY, NY 11530
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PIEKUTOWSKI, THOMAS 159 14TH AVE. SEA CLIFF, NY 11579

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03/29/07-80032-011 150.00

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 reports 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:  **GREGORY SHUNICK** 3/15/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #