2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005672

Entity Name: SIGNATURENY CORPORATION

FILED Feb 20, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
565 FIFTH NEW YOR	I AVE RK, NY 10017			5 FIFTH AV W YORK,	VE NY 10017	US	
Current Mailing Address:				New Mailing Address:			
565 FIFTH NEW YOR	I AVE RK, NY 10017		12	W. 38TH S TH FLOOF EW YORK,		US	
FEI Number	: 13-4149421	FEI Number Applied For()	FEI Number	Not Applica	ıble ()	Certificate of Status	s Desired ()
Name and	l Address of C	urrent Registered Agent:	Na	me and A	ddress of N	lew Registered A	gent:
1201 HAYS TALLAHAS The above in the State	e of Florida.		urpose of ch	anging its	registered o	ffice or registered	agent, or both,
SIGNATUI		ic Signature of Registered Age	ent			 Date	
	S AND DIREC	Trust Fund Contribution ().	AD	DITIONS/	CHANGES	TO OFFICERS A	ND DIRECTOR
Title: Name: Address: City-St-Zip:	CCOV () MERLO, MICHA 565 FIFTH AVE NEW YORK, NY			me: M dress: 5	(CCO (X) MERLO, MICHA 165 FIFTH AVE NEW YORK, N		
Title: Name: Address: City-St-Zip:	PCEO () DEPAOLO, JOS 565 FIFTH AVE NEW YORK, NY				()	Change () Addition	
Title: Name: Address: City-St-Zip:	C () SHAY, SCOTT 565 FIFTH AVE NEW YORK, NY	Delete ′ 10017			()	Change () Addition	
Title: Name: Address: City-St-Zip:	V () TAMBERLANE, 565 FIFTH AVE NEW YORK, NY				()	Change () Addition	
Title: Name: Address: City-St-Zip:	VCOO () SIGONA, MARK 565 FIFTH AVE NEW YORK, NY				()	Change () Addition	
Title: Name: Address: City-St-Zip:	SCRO () HOWELL, ERIC 565 FIFTH AVE NEW YORK, NY			me: H dress: 5	SCFO (X) HOWELL, ERIC 165 FIFTH AVE HEW YORK, NY		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBRA M. EANNEL VP 02/20/2008