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S. ROBERTS FEB 1 0 2022

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: 19-66 77th	Street, Inc.
Name of corporation - n	nust include suffix
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Aut "Certificate of Existence," or "Certificate of Good Standin above referenced foreign corporation to transact business in	g" and check are submitted to register the
Please return all correspondence concerning this matter to	the following:
And a Damicacki	΄. Σ'sι.
Name of Per	son
Percak, Gaffney + Day Firm/Compar	nignatis, P.A.
Firm/Compar	ny A
2348 Sunset Point	Roal
Address	
Clearwater, FL City/State and 2 E-mail address: (to be used for the state of the	33765
City/State and 2	Zip code
# SIC 740;	C gol-com
E-mail address: (to be used for l	future annual report notification)
For further information concerning this matter, please call:	
Anthre Dampinekis at (727) Name of Person Area Code	296 7724
Name of Person Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
The Centre of Tallahassee	P.O. Box 6327
2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	Tallahassee, FL 32314
,	F STATE 78.75 Filing Fee & S87.50 Filing Fee, Certified Copy Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA. 19-66 7-7-4 Street, Inc.
(Enter name of corporation: must include "INCORPORATED." "COMPANY," "CORPORATION." "Inc.." "Co.," "Corp." "Inc." "Co," or "Corp.") (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida) 2. New YORK 3. 11-287-2555

(State or country under the law of which it is incorporated)

4. P123 | 87 5. Per petual

(Date of incorporation)

(Date of duration, if other than perpetual) (Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability) West 53 rd Street, Apt. 1C, New York, NY
(Principal office street address) SAME (Current mailing address, if different) Anthone Damicrakis, Esq.

2348 Sinset Pt. Rd.

Clarinites . Florida 33765

(City) (Zip code) 8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Office Address: 9. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

(Registered agent's signature)

A. DIRECTORS				
∠ Chairman	Name: SAL Romano	∐Chairman	Name:	
□Vice Chairman	Address: 359 W 53 rd St.	□Vice Chairman	Address:	
□Director	Apt IC	☐Director		
∏President	Ver york, NY 10019	□President	-	
□Vice President		□ Vice President		
□ Secretary	Treasurer	Secretary		□Treasurer
□Other		[]Other		□Other
□Chairman	Name:	Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
Director		□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	Secretary		Treasurer
□Other	Other	Other		□Other
□Chairman	Name:	☐ Chairman	Name:	
□Vice Chairman	Address:	□ Vice Chairman	Address:	
Director	.	Director		
□President		[]President		
□Vice President		□Vice President		
☐ Secretary	Treasurer	☐ Secretary		□Treasurer
□Other	Other	[]Other		□Other
individuals may be	Use an attachment to report more than six (6). The added to the index when filing your Florida Depar	tment of State Annual Re	port form.	
12.	Signature of Direct	muca-		. <u></u> .
		or or Officer		
<u> </u>	Signature of Direct			
The officer or direct	ctor signing this document (and who is listed in nurallse information submitted in a document to the De	partment of State constitu		
The officer or direction she is aware that fa	ctor signing this document (and who is listed in nuralse information submitted in a document to the De	partment of State constitution	tes a third degre	

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I. ROBERT J. RODRIGUEZ, Acting Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: 19-66 77TH STREET, INC.

DOS ID Number: 1188874

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 07/23/1987

Statement Status: CURRENT Statement Due Date: 07/31/2023

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on February 07, 2022 at 06:43 P.M.

ROBERT J. RODRIGUEZ. Acting Secretary of State

Brandon C Hydra

By Brendan C. Hughes Executive Deputy Secretary of State

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