## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Apr 24, 2006 08:00 AM Secretary of State

Dayrma Phone #

1. Entity Nam	MEN ( # F9300000338 LTY SERVICES, INC.	- -				·	
Principal Plac 50 BROADWI NEW YORK, 1	AY, 4TH FLOOR	Mailing Address 50 BROADWAY, 4TH FLOOR NEW YORK, NY 10004		א פונו פפוושוג ו	1888 ((1888 (1788 1777) BB))	1951 <b>- 18</b> 19 <b>- 185</b> 185 185 185 186 186 186 186 186 186 186 186 186 186	<b>u. 30</b> 33 <b>6 u.</b> 12 2 <b>02</b> 3
D	O NOT WRITE I	्रे सम्बद्ध	CE.	03242005  4. FEI Number 13-36977  5. Certificate of	224	CR2E034 (11/0	Applied For Not Applicable Additional
SUITE 120	EN ISLES DRIVE	stered Agent			NOT WE		
the obligat	named entity submits this statement for the tons of registered agent.  Signature, typed or printed name of registered agent and its  E NOW!!! FEE IS \$150.00  ay 1, 2006 Fee with be \$550.00		nd Agent signature requires		in the State of Florid	ia. 1 am familiar v	ith, and accept
THLE NAME STREET ADDRESS CSTY-ST-ZSP TIFLE NAME STREET ADDRESS CITY-ST-ZSP	OFFICERS AND DIRE P GROSS, ALLEN 50 BROADWAY, 4TH FLOOR NEW YORK, NY 10004	ECTORS			U8086 05/05/06	98528511 6-80041-0	u8 iSO.0
TISLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME SCREET ADDRESS CITY-ST-ZIP					NOT WE		
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE HAME STREET ADDRESS GITY-ST-ZIP	-			1			, A
12. I hereby a indicated of the cor changed	certify that the information supplied with this on this report or supplemental eport is trye poration or the receiver or trustle emboyer, or on an attachment with an actives.	filling does not quality for the ex- e and accurate and that my signs ed to execute this report as requ all other like empowered.	emptions containe sture shall have the fred by Chapter 60	d in Chapter 119, i same legal effect i 7, Florida Statutes:	Fiorida Statutes, I fu as if made under cat and that my name a	rther certify that the things of the things	ne information icer or director 0 or Block 11 if

NTED NAME OF SIGNING OFFICER OR DIRECTOR