2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 04, 2005 8:00 am Secretary of State 04-04-2005 90084 019 ***150.00

1. Entity Name U.S.N. MANAGEMENT, INC.								04-04-200)5 90084 C	119 ***1	30.00	
Principal Place of Business 2801 PONCE DE LEON BLVD. SUITE 555 CORAL GABLES, FL 33134			Mailing Address 125 THEODORE CONRAD DRIVE JERSEY CITY, NJ 07305 US								11	
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03222005	Chg-P	CR2E034	(10/03)		
City & State			City & State				4. FEI Numbe 65-0521				Applicable	
Zíp	·	Country	Zip	Coun	try	-	5. Certificate of Status Desired S8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent							
C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION, FL 33324						Name Street Address (P.O. Box Number is Not Acceptable)						
					City	City FL Zip Code						
the obligati	ions of regist	tered agent.	r the purpose of changing its					n, in the State of Flo	orida. Lam far	niliar with: a	and accept	
Signature, typed or printed name of registered agent and little it applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
S FILI After Ma	E NOW!!! ay 1, 200	FEE IS \$150.00 5 Fee will be \$550.0	9. Election Campa Trust Fund Cont		ncing	\$5.0 Adde	DO May Be d to Fees		 !	~ - ·		
10.	OFFICERS AND DIRECTORS					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11						
TITLE NAME STREET ADDRESS CITY-ST-ZIP		R, FRED PRD STREET RK, NE 10001	∑A Delete		ε /	Morti	man/Presid Mer Zuck Lexington uyork, N	ierman Ave.	[Change	ÆAddition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	KRALL, MARTIN 450 W 33RD STREET				E /	Lawn 450	or Vice President					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	125 THE	HOMAS H ODORE CONRAD DRIV CITY, NJ 07305	r □ Deloté				, , , , , ,		[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	599 LEXII	MAN, MORTIMER B NGTON AVE RK, NY 10022	☐ Delete		- I				[Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ŀ	R, FRED ST 33RD STREET RK, NY 10001	Delete						(Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete		- 1		-		······································	_ Change	Addition	
12. I hereby indicated of the cor	certify that the control on this reportion or the control of the c	ne information supplied with ort or supplemental report is the receiver or trustee emp	n this filing does not qualify for strue and accurate and that if owered to execute this report with all other like empowered	r the exe my signa as requ	emption stated ture shall hav ired by Chapt	d in Sec ve the s ter 607,	ction 119.07(3)(ame legal effec Florida Statute	i), Florida Statutes. t as if made under s; and that my nam	I further certif oath; that I am le appears in I	y that the in an officer Block 10 or	formation or director Block 11 if	

3-31-05 212-210-210D

INTED NAME OF SIGNING OFFICER OF DIRECTOR SOLV. P. Lawrence A. Marcus, Sor. V.P.