2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000004355

City-St-Zip:

FILED Apr 21, 2009 Secretary of State

Entity Nan	ne: BALMOR	I ASSOCIATES, INC.			
Current Pr	incipal Place	of Business:	New Principal Place of	New Principal Place of Business:	
820 GREEN 3RD FLOO NEW YOR			833 WASHINGTON ST 2ND FLOOR NEW YORK, NY 10014		
Current Ma	ailing Addres	s:	New Mailing Address:		
820 GREEN 3RD FLOO NEW YOR!			833 WASHINGTON ST 2ND FLOOR NEW YORK, NY 10014		
FEI Number:	06-1286819	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of N	Name and Address of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAI DN, FL 33324	ND ROAD			
The above in the State		submits this statement for the p	ourpose of changing its registered o	ffice or registered agent, or both,	
SIGNATUR	:E:				
Electronic Signature of Registered Agent			ent	Date	
Election Cam	paign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	BALMORI, DIA	Delete NA CHIST 3RD FLOOR	Title: PRES (X) Name: BALMORI, DIAN Address: 833 WASHINGT		

City-St-Zip: NEW YORK, NY 10014 City-St-Zip: NEW YORK, NY 10014

() Delete Title: (X) Change () Addition NOBLE, CHRISTOPHER L Name: SAPERS, CARL M Name: Address: ONE INTERNATIONAL PLAZA Address: 1280 MASSACHUSETTS AVENUE CAMBRIDGE, MA 02140

BOSTON, MA 02110 City-St-Zip: City-St-Zip:

Title: Title: DIR () Change (X) Addition () Delete Name: Name: JAVIER, GONZALEZ-CAMPA Address: Address: 190 6TH AVE, 4RS

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.

City-St-Zip:

NEW YORK, NY 10013

SIGNATURE: DIANA BALMORI **PRES** 04/21/2009