

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

06 MAY -1 PM 2:13

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04262006 No Chg-P CR2E034 (11/05)

4. FEI Number 76-2654418	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE IN THIS SPACE**

## 6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

## 10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP ROTHENBERG, STUART M 85 BROAD STREET NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT WEISS, MITCHELL S 10 HANOVER SQ NEW YORK, NY 10005
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP NAUGHTON, KEVIN 85 BROAD ST. NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, TODD 85 BROAD ST. NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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05/22/06--01067--006 \*\*1650.00

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mitchell S. Weiss 4/28/06 212-902-3867  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #