

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # F98000006518	
1. Entity Name WORTH-PONDFIELD MANAGEMENT CORP.	



Principal Place of Business C/O SAMSON MANAGEMENT 97-77 QUEENS BLVD., STE 710 REGO PARK, NY 11374	Mailing Address C/O SAMSON MANAGEMENT 97-77 QUEENS BLVD., STE 710 REGO PARK, NY 11374
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01132005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3494409	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent WAXMAN, MARK Z 235 SOUTH COUNTY RD., STE 210 PALM BEACH, FL 33480
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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOLDSTEIN, ARNOLD 97-77 QUEENS BLVD., STE 710 REGO PARK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BIANCO, JOHN 97-77 QUEENS BLVD., STE 710 REGO PARK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WAXMAN, MARK Z 235 SOUTH COUNTY RD., STE 210 PALM BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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01/24/05-80019-016 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 a power of attorney empowered.

SIGNATURE: ARNOLD GOLDSTEIN 1/13/05 (718) 830 0131

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #