

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F98000007147

1. Entity Name
NINA NUMBER ONE (USA) LIMITED INC.



Principal Place of Business
C/O B.K. HAIMES, THELEN REID
875 THIRD AVENUE 14TH FLOOR
NEW YORK, NY 10022

Mailing Address
C/O B.K. HAIMES, THELEN REID
875 THIRD AVENUE 14TH FLOOR
NEW YORK, NY 10022

FILED
Apr 04, 2005 08:00 AM
Secretary of State



03292005 No Chg-P CR2E034 (10/03)

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4. FEI Number
94-3089850

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301

**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, 2005 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	PTD HAIMES, BURTON K C/O THELEN REID, 875 THIRD AVENUE NEW YORK, NY 10022
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WEISS, GORDON J 1 BLUE HILL PLAZA, 5TH FLOOR PEARL RIVER, NY 10965
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04/05/05-80007-023 150.00

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IN THIS SPACE**

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 all other like empowered.

SIGNATURE:

Burton K. Haimes

Burton K. Haimes, President 3-30-05 (212) 603-2060

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #