2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2006 08:00 AM
Secretary of State

DOCUMENT # F99000001032

1. Entity Name
MARIANNE USPR, INC.

Principal Place of Business	Mailing Address
C/O URBAN BRANDS, INC. 100 METRO WAY SECAUCUS, NJ 07094	C/O URBAN BRANDS, INC. 100 METRO WAY SECAUCUS, NJ 07094

DO NOT WRITE IN THIS SPACE

03022006 No Chg-P CR2E034 (11/05)

4. FEI Number
22-3622193
☐ 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 32301-2525

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

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	CFOS
NAME	FELDMAN, STEVE
STREET ADDRESS	100 METRO WAY
CITY-ST-ZIP	SECAUCUS, NJ 07094
TITLE	CEO
NAME	SHAPIRO, ETHAN
STREET ADDRESS	100 METRO WAY
CITY-ST-ZIP	SECAUCUS, NJ 07094
TITLE	TVP
NAME	ABATE, MICHAEL A
STREET ADDRESS	100 METRO WAY
CITY-ST-ZIP	SECAUCUS, NJ 07094
TITLE	D
NAME	PHOENIX, WILLIAM
STREET ADDRESS	100 METRO WAY
CITY-ST-ZIP	SECAUCUS, NJ 07094
TITLE	D
NAME	THOMPSON, DARRYL
STREET ADDRESS	100 METRO WAY
CITY-ST-ZIP	SECAUCUS, NJ 07094
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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03/23/06-80040-007 150.00

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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: _____ MICHAEL A. ABATE Vice President/Treasurer 3/08/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #