


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2005 08:00 AM
Secretary of State

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| DOCUMENT # K87417 |  |
| 1. Entity Name IGC REALTY, INC. | |

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| Principal Place of Business 21 VANDERVENTER AVENUE PORT WASHINGTON, NY 11050 US | Mailing Address 21 VANDERVENTER AVENUE PORT WASHINGTON, NY 11050 US |
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DO NOT WRITE IN THIS SPACE



01052005 No Chg-P CR2E034 (10/03)

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|--|---------------------------------------|
| 4. FEI Number 65-0118527 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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| 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

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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PS CASAMASSIMA, MATTHEW E 21 VANDERVENTER AVENUE PORT WASHINGTON, NY 11050 |
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01/10/05-80089-016 158.75

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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 all other like empowered

SIGNATURE: Matthew Casamassima **MATTHEW CASAMASSIMA** **PRESIDENT** 1/5/05 516-883-8400

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