

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 29, 2008 8:00 am**  
**Secretary of State**

04-29-2008 90074 001 \*\*\*150.00

**DOCUMENT # P04000107268**

1. Entity Name  
1111 PENNSYLVANIA 26, INC.



Principal Place of Business  
4434 NORTH BAY RD.  
MIAMI BEACH, FL 33140

Mailing Address  
4434 NORTH BAY RD.  
MIAMI BEACH, FL 33140



04232008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
20-1464391

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

BERKOWITZ, ABBEY  
4434 NORTH BAY RD.  
MIAMI BEACH, FL 33140

**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, 2008 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	KARASICK, MARK
STREET ADDRESS	601 W. 26 STREET, #1260
CITY-ST-ZIP	NEW YORK, NY 10001
TITLE	D
NAME	JOSEPH, JERRY
STREET ADDRESS	%ESQUIRE CORP. NETWORK, 41 STATE ST., #401
CITY-ST-ZIP	ALBANY, NY 12207
TITLE	D
NAME	SKIBINSKY, JODIE
STREET ADDRESS	%ESQUIRE CORP. NETWORK, 41 STATE ST., #401
CITY-ST-ZIP	ALBANY, NY 12207
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-28-08

Date

Daytime Phone #