## 2007 FOR PROFIT CORPORATION

**FILED** 1A 00 tate

ANNUAL REPORT				Apr 05, 2007 08:  Secretary of S			
DOCUMENT # P04000136647  1. Entity Name NEW YORKER DELI, INC.						Secret	tary of S
3001 EAST CERVANTES STREET 30		Mailing Address 3001 EAST CERVANTES STRE PENSACOLA, FL 32503	3001 EAST CERVANTES STREET		86111 81811 88111 88111 E	<b>.</b>	III 82211 (281881 II 1881
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_	O NOT WRITE	<b>○</b> E	03262007	No Chg-P	, CR2E034 (	11/05)	
DO NOT WRITE IN THIS SPA			CE	4. FEI Number 20-169		<del></del>	Applied For Not Applicable
				5. Certificate	of Status Desired		75 Additional Required
	6. Name and Address of Current R	egistered Agent					
NIX, WAYNE 1387 LITTLE DUCK CIRCLE GULF BREEZE, FL 32563			DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for ions of registered agent  Signature, lyned Wonnted name of registered agent ar		red office or registe.	· · · · · · · · · · · · · · · · · · ·	th, in the State of F	3/28/0	
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campaign Fina Trust Fund Contribution		.00 May Be ded to Fees			
10.	OFFICERS AND C	IRECTORS	_				<u> </u>
NAME STREET ADDRESS CITY-ST-ZIP	D NIX, WAYNE 3001 EAST CERVANTES STREE PENSACOLA, FL 32503	т `	İ				
TITLE NAME STREET ADDRESS CUTY-ST-ZIP					9000 04/13/0	00692104 7-80037-0	09 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT V	VRITE	
NAME STREET ADDRESS CITY-ST-ZIP			]	IN <sup>-</sup>	THIS S	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE			1				

12. Thereby certify that the information supplied with this filling 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: \_

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR