2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000042590

Entity Name: 60 N 11 ST CORP.

FILED Mar 03, 2006 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
1209 MANDARIN ISLE FT LAUDERDALE, FL 33315				60 N.E. 11 STREET MIAMI, FL 33132		
Current Mailing Address:			New Maili	New Mailing Address:		
1209 MANDARIN ISLE FT LAUDERDALE, FL 33315				60 NE 11 STREET MIAMI, FL 33132		
FEI Number: 20	0-2546513	FEI Number Applied For ()	FEI Number Not Appl	cable () Certificate of Status Desire	ed ()	
Name and A	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:		
MIAMI BEAC The above na in the State o	of Florida.	US	ırpose of changing i	s registered office or registered agent,	or both,	
SIGNATURE		c Signature of Registered Ager	nt	 Date		
Election Camp		Trust Fund Contribution ().	ıı	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Name: C Address: 5	D () CORBA, PETER 51 ROBBISON A GLEN COVE, NY	VE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Name: [Address: 1	D () DROZD, ALEKS, 115A DOBBIN S BROOKLYN, NY	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition		
Name: F Address: 2	D () RAMLIAK, NICK 248 DRIGGS AV BROOKLYN, NY		Title: Name: Address: City-St-Zip:	D (X) Change () Addition SLIFKIN, DAVID 555 NE 15 STREET MIAMI, FL 33132		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER CORBA D 03/03/2006