

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000017585

Entity Name: NYT OF K.B., INC.

FILED
Apr 20, 2009
Secretary of State

Current Principal Place of Business:

1110 BRICKELL AVE., 7TH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

1110 BRICKELL AVENUE
SUITE 700
MIAMI, FL 33131

Current Mailing Address:

1110 BRICKELL AVE., 7TH FLOOR
MIAMI, FL 33131

New Mailing Address:

1110 BRICKELL AVENUE
SUITE 700
MIAMI, FL 33131

FEI Number: 20-8411602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATRIUM REGISTERED AGENTS, INC.
1500 SAN REMO AVENUE, SUITE 125
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

ALAN W. LEVINE, ESQUIRE
1110 BRICKELL AVENUE
SUITE 700
MIAMI, FL 33131 US

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.

SIGNATURE: ALAN W. LEVINE

04/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MORENO MENDOZA, FERNANDO
Address: 1500 SAN REMO AVENUE, SUITE 125
City-St-Zip: CORAL GABLES, FL 33143

Title: VPSD () Delete
Name: SANCHO LORA, ALEJANDRO
Address: 1500 SAN REMO AVENUE, SUITE 125
City-St-Zip: CORAL GABLES, FL 33143

Title: D (X) Delete
Name: MENDOZA, JOSE LUIS
Address: 1500 SAN REMO AVENUE, SUITE 125
City-St-Zip: CORAL GABLES, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MORENO MENDOZA, FERNANDO
Address: 1110 BRICKELL AVENUE SUITE 700
City-St-Zip: MIAMI, FL 33131

Title: D (X) Change () Addition
Name: MENDOZA, JOSE LUIS
Address: 1110 BRICKELL AVENUE SUITE 700
City-St-Zip: MIAMI, FL 33131

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FERNANDO MORENO MENDOZA

PD

04/20/2009

Electronic Signature of Signing Officer or Director

Date