

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000028029

FILED
Mar 02, 2012
Secretary of State

Entity Name: SHIP HOUSE, INC.

Current Principal Place of Business:

51 W 52ND STREET
NEW YORK, NY 10019 US

New Principal Place of Business:

Current Mailing Address:

C/O ADRIENNE HARRINGTON
51 W 52ND STREET
NEW YORK, NY 10019 US

New Mailing Address:

C/O ADRIENNE HARRINGTON
51 W 52ND STREET (19-13)
NEW YORK, NY 10019 US

FEI Number: 25-1706816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP
Name: BRISKMAN, LOUIS J
Address: 51 W 52ND STREET
City-St-Zip: NEW YORK, NY 10019

Title: AS
Name: KOCZKO, MICHAEL A
Address: 51 W 52ND STREET
City-St-Zip: NEW YORK, NY 10019

Title: DVCF
Name: IANNIELLO, JOSEPH R
Address: 51 W 52ND STREET
City-St-Zip: NEW YORK, NY 10019

Title: VS
Name: STRAKA, ANGELINE C
Address: 51 W 52ND STREET
City-St-Zip: NEW YORK, NY 10019

Title: VAS
Name: TANZI, LISA M
Address: 51 W 52ND STREET
City-St-Zip: NEW YORK, NY 10019

Title: VAS
Name: SOBCZAK, ERIC J
Address: 20 STANWIX STREET
City-St-Zip: PITTSBURGH, PA 15222

I hereby 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 all other like empowered.

SIGNATURE: LISA M. TANZI

VAS

03/02/2012

Electronic Signature of Signing Officer or Director

_____ Date