


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 19, 2004 08:00 AM
Secretary of State

| | |
|--|---|
| DOCUMENT # P94000027525 1. Entity Name U.S. HWY. 192 PROPERTIES, INC. |  |
|--|---|

| | |
|--|--|
| Principal Place of Business 555 WEST 57TH STREET, STE. 1325 NEW YORK, NY 10019 | Mailing Address 555 WEST 57TH STREET, STE. 1325 NEW YORK, NY 10019 |
|--|--|

DO NOT WRITE IN THIS SPACE

| | |
|--|-------------------------------|
| 07062004 No Chg-P CR2E034 (10/03) | |
| 4. FEI Number 13-3767609 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

| |
|---|
| 6. Name and Address of Current Registered Agent WRIGHT, LYNN WALKER ESQ. WRIGHT, RAILEY & HARDING, P.A. 2716 REW CIRCLE, SUITE 102 OCOE, FL 34761 |
|---|

**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 _____ <small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when re-registering)</small> | DATE _____ |
|---|------------|

| | | |
|---|--|---|
| FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
|---|--|---|

| 10. OFFICERS AND DIRECTORS | |
|--|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D GOREN, ALEXANDER 150 E. 52ND ST., 29TH FLOOR NEW YORK, NY 10022 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DS STEINBERG, CATHERINE 555 WEST 57TH STREET, STE. 1325 NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | |

1000000167343
07/19/04-80021-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <i>Catherine Steinberg</i> Catherine Steinberg 7/13/04 (212)459-0500 | Date | Daytime Phone # |
|--|------|-----------------|