FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000097671 (8)

NY HOLDINGS, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						i indiinde tia 1840; diili donii donii taiil	Marka annii ahara dicit ian	IEI 1101 (00)	
250 VALENCIA AVENUE 250 VALENCIA AVENUE CORAL GABLES FL 33134 CORAL GABLES FL 33134			н	DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualified 12/27/1995			
2. Principal Place of Business 2e. Mailing Address						4. FEI Number	I Ar	oplied For	
21	26				65-0711085	 	ot Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	Additional	
22 27						5. Certificate of Status Desired	Fee Re	equired	
City & State	0	City & State			Ī	Election Campaign Financing Trust Fund Contribution Added to Fees			
Zip			Country			8. This corporation owes or has paid the current year Intangible			
24	25 29 30		30	Personal Property Tax due June 30. 🔲 Yes 🔲 No					
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
MIL	LER, GEORGE		8	1 Name	9				
250 VALENCIA AVE.			Į	2 Street	Address	s (P.O. Box Number is Not Acceptable	1)		
"	RAL GABLES FL 33134		8	3					
•			1	4 City			 85 Zip (Code	
ł	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statut of Florida. Such change was ations of, Section 607.0505, Fi	es, the abo authorized orida Statu	bye-named by the colles.	d corpora rporation	ation submits this statement for the purion is board of directors. I hereby accept	rpose of changing it the appointment as	ts registered registered	
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable. (NO)	E: Registered	gent signatur	re required v	when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE		RS IN 12	
TITLE	DPT	DELETE	1.1 TITL	E	T		☐ Change	Addition	
NAME	MILLER, GEORGE		1.2 NAM	ΙĒ	1			Ì	
STREET ADDRESS	250 VALENCIA AVENUE		1.3 STA	EET ADDRESS					
CITY - ST - ZIP	CORAL GABLES FL 33134		1.4 CITY	1.4 CITY-ST-ZIP					
TITLE	V DELETE		2.1 TITL	2,1 TITLE			☐ Change	Addition	
NAME	HENNESSY, DAVID C.		2.2 NAM	2.2 NAME				ł	
STREET ADORESS	22481 PLEASANT PARK RD.		2.3 STR	ET ADORESS	1				
CITY-ST-ZIP	CONIFER CO 80433			2. 4 CITY-ST-ZIP				1.000	
TITLE	VS DELETE			3.1 TITLE			X Change	Addition	
NAME	244 AM AM DD					rkowitz, Joel S.			
STREET ADDRESS	s 2115 KNAAB DR. BOZEMAN MT 59715					3 Ivy Lane		}	
CITY-ST-ZIP TITLE	V DOZEMAN MI 99/19	DELETE	3.4. CIT 4.1 TITL		Wel	ston, FL 33326	☐ Change	Addition	
NAME	HARKEY, MICHAEL K.	□ btreit	4.1 HLL				Grange		
STREET ADORESS	2803 W. BUSCH BLVD. #208	<u> </u>		ET ADDRESS				,	
CITY-ST-ZIP	TAMPA FL 33818	•		-ST-ZIP					
TITLE	A	DELETE	5.1 TITL		+		Change	Addition	
NAME	SIMPSON, ANNA M	<u> </u>	5.2 NAM		1		•-		
STREET ADDRESS	850 HANGMANS RD.			ET ADDRESS	1				
CITY-ST-ZIP	BAILEY CO		1	-ST-ZIP	1			j	
TITLE		DELETE	6.1 TITL		1		☐ Change	Addition	
NAME			6.2 NAM	IE 3	1				
STREET ADDRESS			6.3 STR	ET ADDRESS	Ī				
CITY-ST-ZIP			6.4 CITY	-ST-ZIP	<u> </u>				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: