2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000034496

Entity Name: SRBB. INC.

FILED Mar 17, 2006 Secretary of State

Entity Nar	me: SRBB, ING	<i>ن</i> .				
Current Principal Place of Business:				New Principal Place of Business:		
	LEGE PARKW/ S, FL 3390755					
Current Mailing Address:				New Mailing Address:		
145 EAST 32 STREET SUITE 500 NEW YORK, NY 10016 US				275 SEVENTH AVENUE 27TH FL NEW YORK, NY 10001 US		
	: 13-3887455	FEI Number Applied For()	FEI Nur	nber Not App		Certificate of Status Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
7431 COLI FORT MYE	LÉGE PARKW ERS, FL 33907	US	urnose c	of changing i	its registered (office or registered agent, or both
	e of Florida.	ubilitis tilis statement for the p	urpose o	ir changing i	its registered t	of registered agent, or both
SIGNATUR	RE:					
Election Cor		c Signature of Registered Age	nt			Date
		Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () SCHULMAN, MA 145 E 32ND ST NEW YORK, NY	5TH FLR		Title: Name: Address: City-St-Zip:	SCHULMAN, M	AVENUE 27TH FL
Title: Name: Address: City-St-Zip:	D () RONCA, ALBER 145 E 32ND ST, NEW YORK, NY	5TH FLR		Title: Name: Address: City-St-Zip:	RONCA, ALBE	AVENUE 27TH FL
Title: Name: Address: City-St-Zip:	D (X) BUCUVALAS, M 145 E 32ND ST NEW YORK, NY	, 5TH FLR		Title: Name: Address: City-St-Zip:	() Change ()Addition
Title: Name: Address:	BOYLE, JOHN N	Delete 1 LE RD, STE 820		Title: Name: Address:	() Change () Addition

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.

City-St-Zip:

SIGNATURE: ALBERT A RONCA D 03/17/2006

SILVER SPGS, MD 20910

City-St-Zip: