

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000090240

Entity Name: NW 165 ST., INC.

FILED
Mar 06, 2008
Secretary of State

Current Principal Place of Business:

5100 NW 165TH ST
MIAMI, FL 33014-330 US

New Principal Place of Business:

Current Mailing Address:

1875 MCCARTER HWY
NEWART, NJ 07104 US

New Mailing Address:

FEI Number: 22-3545821

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAFER, AL
1500 S. OCEAN BLVD.
SUITE S901
BOCA RATON, FL 33432 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAFER, ALBERT
Address: 1875 MCCARTER HWY.
City-St-Zip: NEWARK, NJ 07104

Title: SVP () Delete
Name: HERMANN, STEVEN
Address: 1875 MCCARTER HWY
City-St-Zip: NEWARK, NJ 07104

Title: EVP () Delete
Name: NEUER, PHILIP D
Address: 5100 NW 165TH ST
City-St-Zip: MIAMI, FL 33014

Title: SAS () Delete
Name: NEUER, PHILIP D
Address: 1875 MCCARTER HWY
City-St-Zip: NEWARK, NJ 07104

Title: T () Delete
Name: WACHSMAN, RICHARD
Address: 1875 MCCARTER HWY
City-St-Zip: NEWARK, NJ 07104

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LISA A. FREED

ESQ.

03/06/2008

Electronic Signature of Signing Officer or Director

Date