2007 FOR PROFIT CORPORATION

Jan 22, 2007 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # P98000012346 01-22-2007 90092 044 ***150.00 SEVENTEEN DAVIS REALTY CORPORATION Principal Place of Business Mailing Address 111 EAST 61ST STREET 111 EAST 61ST STREET NEW YORK, NY 10021 NEW YORK, NY 10021 CR2E034 (11/05) 01162007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3492933 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. CEO TITLE SLOVIN, BRUCE NAME 111 EAST 61ST STREET ADDRESS CITY - ST - ZIP NEW YORK, NY 100021 TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 postee 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: 🚣

CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

Daytime Phone #

FILED