

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000031800

Entity Name: BINGHAMTON REALTY INC.

FILED  
Mar 26, 2008  
Secretary of State

## Current Principal Place of Business:

NRAI SERVICES, INC.  
415 EAST PARK AVE.  
TALLAHASSEE, FL US

## New Principal Place of Business:

## Current Mailing Address:

505 PARK AVE., 9TH FLOOR  
NEW YORK, NY 10022

## New Mailing Address:

FEI Number: 59-3569967      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: DP ( ) Delete  
Name: SEINJET, MASSI  
Address: 505 PARK AVENUE  
City-St-Zip: NEW YORK, NY 10022

Title: DS ( ) Delete  
Name: SEINJET, DAVID  
Address: %505 PARK AVE 9TH FLOOR  
City-St-Zip: NEW YORK, NY 10022

Title: VP ( ) Delete  
Name: LEIBMAN, DAVID  
Address: %505 PARK AVE 9TH FLOOR  
City-St-Zip: NEW YORK, NY 10022

## 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:

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: DAVID LEIBMAN

VP

03/26/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date