

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000000302

Entity Name: N PLAY, INC.

**Current Principal Place of Business:**

290 SHORE DRIVE EAST  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

690 GREENWICH ST  
1J  
NEW YORK, NY 10014

FEI Number: 90-0345199

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

MACCIA, MIKE  
290 SHORE DRIVE EAST  
COCONUT GROVE, FL 33133 US

*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

**Officer/Director Detail :**

Title D  
Name COHEN, ERIC  
Address 1 HARBORSIDE PLACE  
APT 152  
City-State-Zip: JERSEY CITY NJ 07311

Title D  
Name MACCIA, MIKE  
Address 701 BRICKELL AVE., STE 1550  
City-State-Zip: MIAMI FL 33131

Title D  
Name MARC, LEVIN  
Address 333 HUDSON STREET, 6TH FLOOR  
City-State-Zip: NEW YORK NY 10013

Title D  
Name LANZA, ROBERT  
Address HISCOCK & BARCLAY, 7 TIMES  
SQUARE TOWER, 4  
City-State-Zip: NEW YORK NY 10020

Title D  
Name LICALSI, PAUL  
Address MITCHELL, SILBERBERG;12 EAST  
49TH; 30TH FL  
City-State-Zip: NEW YORK NY 10017

Title D  
Name CARDILLO, JOHN  
Address 290 SHORE DRIVE EAST  
City-State-Zip: COCONUT GROVE FL 33133

*I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: ERIC COHEN

FOUNDER/EXECUTIVE  
DIRECTOR

04/30/2014

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date