

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063825

FILED
Jul 02, 2007
Secretary of State

Entity Name: SYCAMORE RIVER EQUITY PARTNERS LLC

Current Principal Place of Business:

2600 HOLLYWOOD BOULEVARD
SUITE 215
HOLLYWOOD, FL 33020 US

New Principal Place of Business:

8515 SUNRISE LAKES BLVD
BLDG 311
SUNRISE, FL 33322 US

Current Mailing Address:

281 SUMMERHILL ROAD
SUITE 207
EAST BRUNSWICK, NJ 08816 US

New Mailing Address:

FEI Number: 59-3794511 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PALEVSKY, LEONARD
Address: 281 SUMMERHILL ROAD
City-St-Zip: EAST BRUNSWICK, NJ 08816 US

Title: MGRM () Delete
Name: SCHWARTZ, MARTIN
Address: 9321 ETON AVENUE
City-St-Zip: CHATSWORTH, CA 91311 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LEONARD I PALEVSKY

MGR

07/02/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date