


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 08, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L05000088559 1. Entity Name W&M SC CORNERSTONE II L.L.C.	
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Principal Place of Business C/O W&M PROPERTIES, L.L.C. 60 EAST 42ND STREET NEW YORK, NY 10165	Mailing Address C/O W&M PROPERTIES, L.L.C. 60 EAST 42ND STREET NEW YORK, NY 10165
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01182008No Chg-LLC CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 20-3466568	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

KLUGER, PERETZ, KAPLAN & BERLIN, P.L.  
 C/O JAMIE M. COCO  
 201 S. BISCAYNE BLVD., #1700  
 MIAMI, FL 33131

**DO NOT WRITE 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MALKIN, PETER L 60 EAST 42ND STREET NEW YORK, NY 10165
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MALKIN, ANTHONY E 60 EAST 42ND STREET NEW YORK, NY 10165
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 02/18/08-80037-004 138.75

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Jack R. Lince* January 18, 2007 (212)850-2690  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #