

**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.



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



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 ☐

**\$5.00** 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

000000820639  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

January 18, 2007 (212)850-2690

Date

Daytime Phone #