2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000112855

1. Entity Name 49 WEST 49TH STREET, LLC



FILED Feb 08, 2007 08:00 A Secretary of State

Principal Place of Business

5160 N. BAY ROAD MIAMI BEACH, FL 33140 Mailing Address

5160 N. BAY ROAD MIAMI BEACH, FL 33140



П

02042007 No Chg-LLC

5. Certificate of Status Desired

CR2E083 (11/05)

4. FEI Number 20-4189956

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

JONATHAN H. GREEN & ASSOCIATES, P.A. 799 BRICKELL PLAZA SUITE 700 MIAMI, FL 33131

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| The above named entity submits this statement for the purpose of the obligations of registered agent. | chang | jing its | registered office or | registered agent, o | r both, in the | State of Floric | ta. I am familiar | with, and accept |
|---|-------|----------|-----------------------------|------------------------------|----------------|-----------------|-------------------|------------------|
| SIGNATURE | | | | . | • | - | | , , |
| Signature, typed or printed name of registered agent and title if applicable. | | (NOTE | E: Registeréa Agent signatu | re required when reinstating | g) · | | DATE | <u> </u> |
| | | | | | | | | |

Filing Fee is \$50.00 Due by May 1, 2007

| 9.: | MANAGING MEMBERS/MANAGERS | |
|-------------------------|---|--|
| TITLE , | MGRM | |
| NAME | KOVEL, KIM | |
| STREET ADDRESS | 5160 N BAY RD | |
| CITY-ST-ZIP | MIAMI BEACH, FL 33140 | |
| TITLE | | |
| NAME | | |
| Street address | | |
| CITY-ST-ZIP | | |
| TITLE | | |
| NAME | | |
| STREET ADDRESS | | |
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| CITY-ST-ZIP | ·. • · | |
| · TITLE | A CONTRACT OF THE CONTRACT OF | |
| NAME | | |
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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:

RE:

2/4/07

Date

Daytime Phone #