

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077193

FILED
Jan 15, 2009
Secretary of State

Entity Name: SHAPLIAN, LLC

Current Principal Place of Business:

152 E. 65TH STREET
#1
NEW YORK, NY 10021

New Principal Place of Business:

Current Mailing Address:

152 E. 65TH STREET
#1
NEW YORK, NY 10021

New Mailing Address:

FEI Number: 56-2602987 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAPOLSKY, LISA
110 PEGASUS DR.
JUPITER, FL 33477 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: P () Delete
Name: SHAPOLSKY, ANITA
Address: 152 E 65 STREET
City-St-Zip: NEW YORK, NY 10021

Title: S () Delete
Name: SHAPOLSKY, LISA
Address: 110 PEGASUS DR
City-St-Zip: JUPITER, FL 33470

Title: VP () Delete
Name: SHAPOLSKY, IAN
Address: 152 EAST 65 STREET
City-St-Zip: NEW YORK, NY 10021

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ANITA SHAPOLSKY P 01/15/2009

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