

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999			FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
FILING FEE \$ 188.75	Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE		

FILED
99 MAR -8 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Mailing Address of Limited Liability Company DOCUMENT # M98000000268 IAN SCHRAGER HOTEL MANAGEMENT LLC 235 WEST 46TH STREET NEW YORK NY 10036

1a. Principal Place of Business Address 235 WEST 46TH STREET NEW YORK NY 10036

2. Principal Place of Business 475 10th Avenue Suite, Apt. #, etc. 11th Floor City & State New York NY Zip 10018	2a. Mailing Address 475 10th Avenue Suite, Apt. #, etc. 11th Floor City & State New York NY Zip 10018
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3. Date Organized or Qualified 03/20/1998	3a. State of Formation DE
4. FEI Number 13-3966156	☐ Applied For ☐ Not Applicable
5. Date of Last Report	6. Certificate of Status Desired \$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324

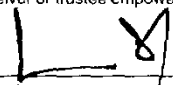
8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ (Registered Agent Accepting Appointment) (NOTE: Registered Agent's signature required when not doing)	DATE _____
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10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	SCHRAGER, IAN	235 WEST 46TH STREET 475 10th Avenue, 11th Floor	NEW YORK NY, 10018 700002806387--E -03/15/99--01131--020 ****188.75 ****188.75 AL MAR 11 1999

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: 	SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING MANAGER/MEMBER OR MANAGER	Date	Original Filing #
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