

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000020550

FILED  
May 01, 2006  
Secretary of State

Entity Name: CROWN LINEN, LLC

**Current Principal Place of Business:**

3235 NW 62ND ST  
MIAMI, FL 33147

**New Principal Place of Business:**

**Current Mailing Address:**

3235 NW 62ND ST  
MIAMI, FL 33147

**New Mailing Address:**

FEI Number: 20-0036473      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

MANDELL, CRAIG J ESQ.  
C/O MOSKOWITZ, MANDELL, SALIM & SIMOWITZ, PA  
800 CORPORATE DRIVE, SUITE 510  
FT. LAUDERDALE, FL 33334 US

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: MGR ( ) Delete  
Name: GLIKSBERG, JACQUES  
Address: 231 SOUTH LA SALLE DT  
City-St-Zip: CHICAGO, IL 60697

Title: MGR ( ) Delete  
Name: VIOLA, MARCO  
Address: 1200 EAST PUTNAM AVE  
City-St-Zip: RIVERSIDE, CT 06878

**ADDITIONS/CHANGES:**

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 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: JACQUES GLIKSBERG

MGR

05/01/2006

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