2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 20, 2008 08:00 Al Secretary of State

Entity Name
1590 NE, LLC



Principal Place of Business

2700 GRAND AVENUE BELLMORE, NY 11710 Mailing Address

2700 GRAND AVENUE BELLMORE, NY 11710



DO NOT WRITE IN THIS SPACE

02132008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2775884

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE, SUITE 4 WESTON, FL 33331

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 little 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			U00000833865 02/28/08-80029-014 143.75
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	THURMAN, HAROLD		
STREET ADDRESS	2700 GRAND AVENUE		
CITY - ST-ZIP	BELLMORE, NY 11710		•
TITLE			

STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY - ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST-ZIP TITLE STREET ADORESS

11. I hereby certify that the information supplied with this filling 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 eath; 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:

CITY-ST-ZIP

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

413 08

Daytime Phone #