

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018912

FILED  
Jul 06, 2006  
Secretary of State

**Entity Name:** EIGHTH STREET ASSOCIATES, L.L.C.

**Current Principal Place of Business:**

1276-50TH STREET, 2ND FLOOR  
SUITE 700  
BROOKLYN, NY 11219

**New Principal Place of Business:**

**Current Mailing Address:**

1276-50TH STREET, 2ND FLOOR  
SUITE 700  
BROOKLYN, NY 11219

**New Mailing Address:**

FEI Number: 58-2663870      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

FEINBERG, JEFFREY  
4000 HOLLYWOOD BLVD.  
SUITE 350-N  
HOLLYWOOD, FL 33021 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: PARNES, ARI  
Address: 1276-50TH STREET, 2ND FLOOR  
City-St-Zip: BROOKLYN, NY 11219

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: PARNES, ARI  
Address: 1276-50TH STREET, 2ND FLOOR, ROOM 700  
City-St-Zip: BROOKLYN, NY 11219

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: ARI PARNES

MGR

07/06/2006

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