

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021976

Entity Name: 110 CAMDEN DRIVE, L.L.C.

FILED  
Jul 05, 2006  
Secretary of State

**Current Principal Place of Business:**

212 E 47TH STREET  
3RD FLOOR  
NEW YORK, NY 11372

**New Principal Place of Business:**

**Current Mailing Address:**

212 EAST 47TH STREET  
3RD FLOOR  
NEW YORK, NY 10017

**New Mailing Address:**

FEI Number: 80-0013162      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:**

COHEN, SETH ESQ.  
2500 N. MILITARY TRAIL STE 1111  
BOCA RATON, FL 33431      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: GOODSTEIN, STEVEN  
Address: 212 EAST 47TH STREET  
City-St-Zip: 3RD FLOOR, NY 10017

Title: MGR      ( ) Delete  
Name: SHAHAK, MORDECHAY  
Address: 212 E 47TH STREET  
City-St-Zip: NEW YORK, NY 10017

**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: STEVEN GOODSTEIN

MGR

07/05/2006

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