

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000022419

FILED  
Jan 29, 2007  
Secretary of State

**Entity Name:** ARIK KISLIN ONE PERCENT (1%) TRUST, LLC

**Current Principal Place of Business:**

90 WILLIAM STREE  
SUITE 501  
NEW YORK, NY 10038

**New Principal Place of Business:**

35 EAST 21ST STREET  
5TH FLOOR  
NEW YORK, NY 10010

**Current Mailing Address:**

90 WILLIAM STREE  
SUITE 501  
NEW YORK, NY 10038

**New Mailing Address:**

35 EAST 21ST STREET  
5TH FLOOR  
NEW YORK, NY 10010

**FEI Number:** 13-7088259

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KISLIN, ELA  
300 SE 56TH AVE  
APT 8080  
BOCA RATON, FL 33432 US

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

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: TR ( ) Delete  
Name: KISLIN, ELA  
Address: 300 SE 5TH AVE, APT 8080  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES:**

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: ELA KISLIN

TR

01/29/2007

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