


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 19, 2008 8:00 am
Secretary of State

02-19-2008 90063 007 ***143.75

DOCUMENT # L02000022419	
1. Entity Name ARIK KISLIN ONE PERCENT (1%) TRUST, LLC	

Principal Place of Business 35 EAST 21ST STREET 5TH FLOOR NEW YORK, NY 10010	Mailing Address 35 EAST 21ST STREET 5TH FLOOR NEW YORK, NY 10010
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DO NOT WRITE IN THIS SPACE

01082008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 13-7088259	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent	
KISLIN, ELA 300 SE 5th Avenue Apt. 5080 BOCA RATON, FL 33432	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 Elia Kislin, ELA KISLIN, TRUSTEE DATE 1/8/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR KISLIN, ELA 300 SE 5TH AVE, APT 5080 BOCA RATON, FL 33432
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11. I hereby certify that the information supplied with this filing 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 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: Elia Kislin DATE 1/8/08 DAYTIME PHONE # 212 785 6600

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