## 2005 LIMITED LIABILITY COMPANY

### **ANNUAL REPORT DOCUMENT # L03000015108**

1. Entity Name TAHARI ELLENTON LLC

Principal Place of Business

501 BROAD AVENUE RIDGEFIELD, NJ 07657 US Mailing Address

**501 BROAD AVENUE** RIDGEFIELD, NJ 07657

US

# **FILED** Jul 14, 2005 8:00 am Secretary of State

07-14-2005 90017 008 \*\*\*\*50.00

20063443



#### DO NOT WRITE IN THIS SPACE

06242005 No Chg-LLC

CR2E083 (10/03)

Applied For 4. FEI Number 02-0703369 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

DE JESUS, LINDA 3783 POMPANO DRIVE SE STREET ST. PETERSBURG, FL 33105

## 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. 1 am familiar with, and accept the obligations of registered agent.				
SIGNATURE				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered /	Agent signature required when reinstating)	DATE
Filing Fee is \$50.00 Due by September 7, 2005				
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	TAHARI, AVRAHAM			
STREET ADDRESS	1141 BUCKINGHAM ROAD			
CITY-ST-ZIP	FORT LEE, NJ 07024			1
TITLE	MGRM			
NAME	COHEN, ITZHAK			
STREET ADORESS	40 KENNEDY ROAD			
CITY-ST-ZIP	CRESSKILL, NJ 07626			
TITLE				!
NAME				
STREET ADDRESS			DO NOT	WRITE
CITY-ST-ZIP			DO NOT	AAITIIL
TITLE			IN THIS	SPACE
NAME			114 11115	OI ACE
STREET ADDRESS				
CITY-ST-ZIP				
TITLE				
NAME				
STREET ADORESS				
CITY-ST-ZIP			<u>.</u>	
TITLE			·	
NAME			• •	
STREET ADDRESS			-	•

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 empoyered to execute his report as required by Chapter 608, Florida Statutes.

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