2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Aug 23, 2005 8:00 am Secretary of State

08-23-2005 90094 020 ****50.00

SIGNATURE:

AND TYPED OR PRINTED NAME OF

DOCUMENT # L03000024475 YURMAN RETAIL FLORIDA, LLC Mailing Address Principal Place of Business 9700 COLLINS AVENUE **24 VESTRY STREET BAY HARBOUR SHOPS** 11TH FLOOR BAL HARBOUR, FL 33154 NEW YORK, NY 10013 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06292005 Chg-LLC CR2E083 (10/03) City & State Applied For City & State 4. FEI Number 57-1179460 Not Applicable Zip Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee is \$50.00 Due by September 7, 2005 Florida Department of State MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. CEO TITLE ☐ Detete TITLE Change ☐ Addition NAME YURMAN, DAVID NAME 481 Greenwich St. 65 186 FRANKLIN ST. STREET ADDRESS STREET ADDRESS NY, NY 10013 CITY-ST-ZIP NEW YORK, NY 10013 CITY-ST-ZIP ☐ Delete TITLE Change Change ___ Addition TITLE YURMAN, SYBIL NAME NAME 481 Greenwich St 63 STREET ADDRESS 186 FRANKLIN ST. STREET ADDRESS NY, NY CITY-ST-ZIP NEW YORK, NY 10013 CITY-ST-ZIP 10015 E۷ ☐ Change ☐ Addition TITLE X Delete TITI F NAME EAGLE, TERRI NAME STREET ADDRESS 339 WEST END AVENUE STREET ADDRESS CITY-ST-ZIP-NEW YORK, NY 10023 CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition TITLE VOGEL, SCOTT NAME NAME 19 John Stone Ct 19 JOHNSTINE CT. STREET ADDRESS RIVER Vale NJ 07675 CITY-ST-ZIP RIVERDALE, NJ 07675 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP CITY-ST-ZIF Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 expowered to execute this report as required by Chapter 608, Florida Statutes. 212-896-1564

ING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE



ATTACHMENT

FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

July 21, 2005

YURMAN DESIGN, INC. 24 VESTRY STREET NEW YORK, NY 10013

Subject: YURMAN DESIGN, INC.

We have received your check(s); however, it (they) was (were) received without a fictitious name application/renewal form. To obtain a form, please call (850) 245-6059 or download either form from our website at "www.sunbiz.org".

After the corrections have been made, return the application to: Fictitious Name Registration, P.O. Box 1300, Tallahassee, Florida 32302-1300 within 30 days from the date of this letter.

Should you have any questions regarding this matter you may contact our office at 850-245-6058.

Division of Corporations

/SC