2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024475

Address:

City-St-Zip:

24 VESTRY ST

NEW YORK, NY 10013

Entity Name: YURMAN RETAIL FLORIDA, LLC

FILED Apr 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9700 COLLINS AVE STE 178/LOT 282 BAL HARBOUR, FL 33154 US **New Mailing Address: Current Mailing Address:** 24 VESTRY STREET 11TH FLOOR NEW YORK, NY 10013 US FEI Number: 57-1179460 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 323012525 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: ADDITIONS/CHANGES: MGR () Delete Title: () Change () Addition YURMAN, DAVID Name: Name: Address: 24 VESTRY ST Address: City-St-Zip: NEW YORK, NY 10013 City-St-Zip: Title: Title: () Delete () Change () Addition Name: YURMAN, SYBIL Name: Address: 24 VESTRY ST Address: City-St-Zip: NEW YORK, NY 10013 City-St-Zip: Title: CEO () Delete Title: () Change () Addition BLUM, PAUL Name: Name: Address: 24 VESTRY ST Address: City-St-Zip: NEW YORK, NY 10013 City-St-Zip: Title: VPF () Delete Title: () Change () Addition Name: VOGEL, SCOTT Name:

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: SCOTT VOGEL VPF 04/03/2009