2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000025269

1. Entity Name SETAI REALTY, LLC



FILED Apr 29, 2008 08:00 AN Secretary of State

Principal Place of Business

2009 COLLINS AVENUE MIAMI BEACH, FL 33139

Mailing Address

C/O SETAI GROUP 405 Lexington Avenue, 54 Floor New York, NY 10174



DO NOT WRITE IN THIS SPACE

03202008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 80-0082125 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS, INC. 103 NORTH MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chailons of registered agent.	nging its registered office or registered agent, or both, in the Stat	e 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 renstating)	DATE	
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75	· · · · · · · · · · · · · · · · · · ·	00000932296	
9.	MANAGING MEMBERS/MANAGERS	Jan 2	2/88-88845-815-138.75	
TITLE	MGRM		• • • •	
NAME	SOLORZANO, CECILIA			
STREET ADDRESS	2009 COLLINS AVENUE			
CITY-ST-ZIP	MIAMI BEACH, FL 33139		:	
THILE	MGRM		I	
NAME	CONROY, JOHN PATRICK JR		+	
STREET ADDRESS	2009 COLLINS AVENUE			
CITY-ST-ZIP	MIAMI BEACH, FL 33139			
TITLE	MGRM			
NAME	BREENE, JONATHAN J	l de la companya de		
STREET ADDRESS	2009 COLLINS AVENUE	DO NOT	DO NOT WRITE	
CTTY-ST-7IP	MIAMI BEACH, FL 33139	וטא טע		
TITLE	MGRM	IN THE	IN THIS SPACE	
NAME	DI BERNARDO, NANCY ANN	GILL AII		
STREET ADDRESS	2009 COLLINS AVENUE			

11. I hereby certify that the information supplied with this filling does not ordalify 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 include mail 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 of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: /////

MIAMI BEACH, FL 33139

CITY-ST-ZIP

TITLE

MAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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

4/25/08 (212)947-7171