2008 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR) – DUE BY MAY 1, 2008

FILED
Mar 07, 2008 8:00 am
Secretary of State
03-07-2008 90224 010 ***138.75

DOCUMENT # L04000043709

1. Entity Name

251 LEXINGTON AVENUE REALTY CO., LLC

Principal Place of Business	Mailing Address
~~141 E. 45TH STREET~~ C/O HENRY J. KASSIS NEW YORK NY 10017	~~141 E. 45TH STREET~~ C/O HENRY J. KASSIS NEW YORK NY 10017

1st MOORE CR2E083 (10/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
c/o HENRY KASSIS, KASSIS MGMT INC	C/O HENRY KASSIS KASSIS MGMT INC
Suite, Apt. #, etc. 271 MADISON AVE RM 1000	Suite, Apt. #, etc. 271 MADISON AVE RM 1000
City & State NEW YORK, N.Y.	City & State NEW YORK, N.Y.
Zip / Country 10016 / USA	Zip / Country 10016 / USA

4. FEI Number 01-0710161 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
EVANS, LESLIE R 214 BRAZILIAN AVE, STE 200 PALM BEACH FL 33480	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW!!! FEE IS $138.75
After May 1, 2008, Fee Will Be $538.75
Make Check Payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KASSIS, HENRY J 141 E. 45TH STREET NEW YORK NY 10017	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HENRY J. KASSIS 271 MADISON AVE RM 1000 NEW YORK, N.Y 10016	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM KASSIS, BARBARA 141 E. 45TH STREET NEW YORK NY 10017	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BARBARA KASSIS 271 MADISON AVE RM 1000 NEW YORK, N.Y. 10016	☑ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____ 2/27/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #