## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000064507

City-St-Zip:

CLEARWATER, FL 33755

Entity Name: REBECCA MINKOFF, LLC

FILED Apr 29, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 403 EDGEWOOD AVENUE CLEARWATER, FL 33755 **Current Mailing Address: New Mailing Address:** 403 EDGEWOOD AVENUE CLEARWATER, FL 33755 FEI Number: 47-0945140 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: MINKOFF, URI Y 403 EDGEWOOD AVENUE CLEARWATER, FL 33755 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: MGRM Title: () Change () Addition () Delete MINKOFF, DAVID Name: Name: 3949 LOS FELIZ BLVD. #311 Address: Address: City-St-Zip: LOS ANGELES, CA 90027 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MINKOFF HOLDINGS, Name: Name: Address: 3949 LOS FELIZ BLVD. #311 Address: City-St-Zip: LOS ANGELES, CA 90027 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition MINKOFF, REBECCA Name: Name: 404 EDGEWOOD AVE. Address: Address: City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: Title: MGRM Title: () Change () Addition ( ) Delete MINKOFF, URI Name: Name: 403 EDGEWOOD AVE. Address: Address: City-St-Zip: CLEARWATER, FL 33755 City-St-Zip: ( ) Delete Title: MGRM Title: () Change () Addition YEHUDA LP, Name: Name: 403 EDGEWOOD AVE. Address: Address:

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.

City-St-Zip:

SIGNATURE: URI MINKOFF MGRM 04/29/2007