

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000064507

Entity Name: REBECCA MINKOFF, LLC

**FILED**  
**Apr 20, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

404 EDGEWOOD AVENUE  
CLEARWATER, FL 33755

**New Principal Place of Business:**

**Current Mailing Address:**

404 EDGEWOOD AVENUE  
CLEARWATER, FL 33755

**New Mailing Address:**

FEI Number: 47-0945140

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MINKOFF, URI Y  
404 EDGEWOOD AVENUE  
CLEARWATER, FL 33755 US

**Name and Address of New Registered Agent:**

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:**

Title: MGRM  
Name: MINKOFF, DAVID  
Address: 700 NORTH OSCEOLA  
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM  
Name: MINKOFF HOLDINGS  
Address: 404 EDGEWOOD AVENUE  
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM  
Name: MINKOFF, REBECCA  
Address: 404 EDGEWOOD AVE.  
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM  
Name: MINKOFF, URI  
Address: 404 EDGEWOOD AVE.  
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM  
Name: YEHUDA LP  
Address: 404 EDGEWOOD AVE.  
City-St-Zip: CLEARWATER, FL 33755

I hereby 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.

SIGNATURE: URI MINKOFF

MGRM

04/20/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date