

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000010340

Entity Name: GLYPS 1712, LLC

FILED  
Apr 24, 2008  
Secretary of State

**Current Principal Place of Business:**

76 NICOLE LOOP  
STATEN ISLAND, NY 10301

**New Principal Place of Business:**

**Current Mailing Address:**

76 NICOLE LOOP  
STATEN ISLAND, NY 10301

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

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

SAPIR, LUBA  
16400 COLLINS AVE  
# 2046  
SUNNY ISLES, FL 33160 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: MGR ( ) Delete  
Name: SAPIR, LUBA  
Address: 76 NICOLE LOOP  
City-St-Zip: STATEN ISLAND, NY 10301

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: LUBA SAPIR

MGR

04/24/2008

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