

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000052610

1. Entity Name
1916 HOLLYWOOD LLC



Principal Place of Business
C/O JENEL MANAGEMENT CORP.
275 MADISON AVENUE
NEW YORK, NY 10016

Mailing Address
C/O JENEL MANAGEMENT CORP.
275 MADISON AVENUE
NEW YORK, NY 10016

FILED
Jul 22, 2008 08:00 AM
Secretary of State



07032008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2930121

Applied For
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

USA COMMERCIAL-RESIDENTIAL, INC
21406 W DIXIE HWY
AVENTURA, FL 33180

**DO NOT WRITE
IN THIS SPACE**

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

Jack S. Dushey

7-17-08

Signature, typed or printed name of registered agent and type, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
Due by September 12, 2008

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

U000000955976
07/22/08-80013-021 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DUSHEY, JACK
STREET ADDRESS	275 MADSON AVE.
CITY- ST- ZIP	NEW YORK, NY 10016
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

JACK DUSHEY

7-09-08 (212) 889-6405

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

DATE

Daytime Phone #