2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000059578

City-St-Zip:

MGRM

FEIT, NORMAN

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125 EAST 87TH STREET, APT. 16-B

NEW YORK, NY 10128 US

Title:

Name:

Address:

City-St-Zip:

Entity Name: 727 RANDOLPH STREET, LLC

FILED Aug 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1659 FORSYTHIA TRAIL ST. GEORGE ISLAND, FL 32328 LIS **Current Mailing Address: New Mailing Address:** C/O JAY W. PEARLMAN P.C C/O JAY W. PEARLMAN, PRESIDENT 445 HAMILTON AVE., STE. 604 73 LEXINGTON STREET WHITE PLAINS, NY 10601 NEWTON, MA 02466 FEI Number: 06-1755128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BEAN, MASON C/O CENTURY 21 COLLINS REALTY, INC. 60 EAST GULF BEACH DRIVE ST. GEORGE ISLAND, FL 32328 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 PEARLMAN, JAY W Name: Name: 17 LAKE TERRACE DRIVE Address: Address: City-St-Zip: DANBURY, CT 06811 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RUSSO, FRANK J Name: Name: Address: 12 EVANGELISTA WAY Address: City-St-Zip: WAKEFIELD, MA 01880 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BENNINGER, MICHAEL S Name: Name: Address: 537 WEYBRIDGE Address: City-St-Zip: BLOOMFIELD HILLS, MI 48304 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition Name: COMER, NEAL S Name: COMER, ISIBELLE 48 PLEASANT RIDGE ROAD Address: Address: 31 STONYGATE OVAL VALHALLA, NY 10595 US NEW ROCHELLE, NY 10804 US

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:

() Change () Addition

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: JAY W. PEARLMAN **MGRM** 08/30/2007