

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089933

Entity Name: M & S INVESTMENT PROPERTIES, LLC

FILED  
Mar 30, 2009  
Secretary of State

**Current Principal Place of Business:**

20 RIVER TERRANCE  
APT 12G  
NEW YORK, NY 10282

**New Principal Place of Business:**

8 RIVER TERRANCE  
APT 4S  
NEW YORK, NY 10282

**Current Mailing Address:**

20 RIVER TERRACE  
12G  
NEW YORK, NY 10282

**New Mailing Address:**

8 RIVER TERRACE  
4S  
NEW YORK, NY 10282

FEI Number: 33-1124913

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

STEINBERG, DOUG  
511 SE FIFTH AVE.  
APT. 1003  
FT. LAUDERDALE, FL 33301 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: STEINBERG, DOUG  
Address: 20 RIVER TERRACE  
City-St-Zip: NEW YORK, NY 10282

Title: MGR ( ) Delete  
Name: STEINBERG, LILLI  
Address: 20 RIVER TERRACE  
City-St-Zip: NEW YORK, NY 10282

**ADDITIONS/CHANGES:**

Title: MR (X) Change ( ) Addition  
Name: STEINBERG, DOUG  
Address: 8 RIVER TERRACE  
City-St-Zip: NEW YORK, NY 10282

Title: MS (X) Change ( ) Addition  
Name: STEINBERG, LILLI  
Address: 8 RIVER TERRACE  
City-St-Zip: NEW YORK, NY 10282

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: DOUG STEINBERG

MR.

03/30/2009

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