2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2008
Secretary of State

DOCUMENT# L06000108614

Entity Name: PEACOCK PLAZA PROPERTIES LLC

Current Principal Place of Business:

2 COLUMBUS AVENUE
APT 15A
NEW YORK, NY 10019 US

New Principal Place of Business:

2 COLUMBUS AVENUE
APT 15A
NEW YORK, NY 10023 US

Current Mailing Address:

2 COLUMBUS AVENUE
APT 15A
NEW YORK, NY 10019 US

New Mailing Address:

2 COLUMBUS AVENUE
APT 15A
NEW YORK, NY 10023 US

FEI Number: 56-2624624 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

HIQ CORPORATE SERVICES, INC.
1574 VILLAGE SQUARE BLVD.
S-100
TALLAHASSEE, FL 32309 US

Name and Address of New Registered Agent:

WELLER, GLENN R
12557 EQUINE LANE
WELLINGTON, FL 33414 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: GLENN R. WELLER 05/11/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HARRIS, FRANKLIN
Address: 2 COLUMBUS AVENUE
City-St-Zip: NEW YORK, NY 10019 US

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: HARRIS, FRANKLIN
Address: 2 COLUMBUS AVENUE, APT 15A
City-St-Zip: NEW YORK, NY 10023 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.

SIGNATURE: FRANKLIN HARRIS MGR 05/11/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date