

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 19, 2009
Secretary of State**

DOCUMENT# L07000014272

Entity Name: IMPRESA22, LLC

Current Principal Place of Business:

200 WEST 70TH STREET
#4
NEW YORK CITY, NY 10023

New Principal Place of Business:

Current Mailing Address:

200 WEST 70TH STREET
#4
NEW YORK CITY, NY 10023

New Mailing Address:

FEI Number: 35-6780388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRASKER, PAUL A ESQ.
625 NORTH FLAGLER DRIVE
9TH FLOOR
WEST PALM BEACH, FL 33401 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: MGRM () Delete
Name: NESPOLI, KATHRYN
Address: 200 WEST 70TH STREET, #4
City-St-Zip: NEW YORK CITY, NY 10023

Title: MGRM () Delete
Name: POLEN, TARA
Address: 252 7TH AVE, 12P
City-St-Zip: NEW YORK CITY, NY 10001

ADDITIONS/CHANGES:

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

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: KATHRYN NESPOLI

OWNE

01/19/2009

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