2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000007985

Entity Name: PHILIPPE MIAMI SOBE LLC

FILED Feb 16, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2305 COLLINS AVE 36 OCEAN DRIVE

MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 US

Current Mailing Address: New Mailing Address:

ATTN: ACCTS. PAYABLE DEPT
399 JERICHO TPKE
250 WEST 57TH ST STE 1429
JERICHO, NY 11753 US
ATTN: ACCTS. PAYABLE DEPT
250 WEST 57TH ST STE 1429
NEW YORK, NY 10107 US

FEI Number: 45-4269546 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MORFOGEN, STRATIS

2305 COLLINS AVE

36 OCEAN DRIVE

MIAMI BEACH, FL 33139 US MIAMI BEACH, FL 33139 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: STRATIS MORFOGEN 02/16/2012

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: MORFOGEN, STRATIS Address: 36 OCEAN AVE

City-St-Zip: MIAMI BEACH, FL 33139 US

Title: MGRM

 Name:
 PHILIPPE, CHAU CHOW

 Address:
 830 WILLOUGHBY ST

 City-St-Zip:
 BROOKLYN, NY 11206 US

Title: MGRM

Name: KANTOR RESTAURANT MIAMI SOBE LLC

Address: 845 UN PLAZA

City-St-Zip: NEW YORK, NY 10017 US

Title: MGRM

Name: STEVEN, BOXER

Address: 200 EAST 57TH ST APT 20M City-St-Zip: NEW YORK, NY 10022 US

I hereby 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 Statues.

SIGNATURE: STRATIS MORFOGEN MGRM 02/16/2012