

2<sup>nd</sup> and File on or before Sept. 29, 1999 or Limited Liability Company  
FINAL NOTICE: will be dissolved.

LIMITED LIABILITY COMPANY ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**FILED**  
99 JUL 26 PM 3:52

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**FILING FEE**  
\$ 588.75

Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee + \$400.00 Late Fee  
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

**DOCUMENT #** L97000000412

VICTORIA SQUARE ASSOCIATES, L.C.  
2525 PALMER AVENUE  
NEW ROCHELLE NY 10801

1a. Principal Place of Business Address

2525 PALMER AVENUE  
NEW ROCHELLE NY 10801

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

04/11/1997

FL

4. FEI Number

☐ Applied For

13-3941503

☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

03/19/1998

\$8.75 Additional Fee Required ☐

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

DATE

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	PIZZITOLA, STEPHEN F	188 EAST 70TH STREET	NEW YORK NY
MGR	WEBER, ALLEN	2525 PALMER AVENUE	NEW ROCHELLE NY

100002949591--7  
-08/03/99--01084--010  
\*\*\*\*188.75 \*\*\*\*188.75

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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; and that my name appears in Block 10, or on an attachment with an address.

ALLEN WEBER

**SIGNATURE:**

*Allen Weber*

7/19/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

(0)

**FILED**  
VICTORIA SQUARE ASSOCIATES, LC  
C/O ALLEN WEBER  
2525 PALMER AVENUE  
NEW ROCHELLE, NEW YORK 10801  
914-636-8400  
914-636-8684

JUL 26 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

New York  
c/o PIZZITOLA ASSOCIATES  
188 E. 70TH Street  
New York, NY 10021  
212-737-2798 (PHONE & FAX)

Florida  
Axion RE Mgmt  
3030 N Rocky PT DR. W  
Tampa, FL 33607  
813-639-1111  
813-639-1919 FAX

July 19, 1999

Florida Department of State  
Division of Corporation  
Registration Section  
409 East Gaines Street  
Tallahassee, FL 32399

Gentlemen:

There is enclosed the Annual Report for the above company together with our check for \$188.75. We hereby affirm that the original notice was never received.

Under the circumstances we respectfully request that the late filing fee be abated. Your consideration of this request is appreciated.

Very truly yours,  
Victoria Square Associates, LC

AW/mm

Allen Weber  
Managing Member