

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001453

Entity Name: MIDLAND OWNERS LLC

FILED
Aug 12, 2005
Secretary of State

Current Principal Place of Business:

108-18 QUEENS BLVD., STE. 302
FOREST HILLS, NY 11375

New Principal Place of Business:

Current Mailing Address:

108-18 QUEENS BLVD., STE. 302
FOREST HILLS, NY 11375

New Mailing Address:

108-18 QUEENS BLVD.,
SUITE 302
FOREST HILLS, NY 11375

FEI Number: 11-2942613 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:

RUDOFISKY, BARRY
4147 SOUTH TAMiami TRAIL
VENICE, FL 34293 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: BRONSTEIN, ALBERT
Address: 111 CHERRY VALLEY AVE
City-St-Zip: GARDEN CITY, NY 11530

Title: MGR () Delete
Name: BRONSTEIN, EILEEN
Address: 111 CHERRY VALLEY AVE
City-St-Zip: GARDEN CITY, NY 11530

Title: MGR () Delete
Name: SILVERMAN, JOANNE
Address: 435 EAST 79TH ST., APT. 9G
City-St-Zip: NEW YORK, NY 10021

Title: MGR () Delete
Name: KATZ, RACHELLE
Address: 21 ANDOVER RD.
City-St-Zip: OLD WESTBURY, NY 11568

Title: MGR () Delete
Name: BRONSTEIN RUDOFISKY, CARYN
Address: 18 ANDOVER RD.
City-St-Zip: OLD WESTBURY, NY 11568

Title: MGR () Delete
Name: RUDOFISKY, BARRY
Address: 18 ANDOVER RD.
City-St-Zip: OLD WESTBURY, NY 11568

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: SCOTT, SILVERMAN
Address: 108-18 QUEENS BLVD SUITE 302
City-St-Zip: FOREST HILLS, NY 11375

Title: MGR (X) Change () Addition
Name: SILVERMAN, JOANNE
Address: 108-18 QUEENS BLVD SUITE 302
City-St-Zip: FOREST HILLS, NY 11375

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

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 for the exemption stated in Section 119.07(3)(i), 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: BARRY RUDOFISKY

MGR

08/12/2005

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