


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 09, 2007 08:00 AM
Secretary of State

DOCUMENT # M01000002869 1. Entity Name SETAI SOUTH BEACH LLC	
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Principal Place of Business C/O THE SETAI GROUP 405 LEXINGTON AVE, 54TH FL NEW YORK, NY 10174	Mailing Address C/O THE SETAI GROUP 405 LEXINGTON AVE, 54TH FL NEW YORK, NY 10174
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01122007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 13-4123260	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CONROY, JOHN P 405 LEXINGTON AVE., 54TH FLOOR NEW YORK, NY 10174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BREENE, JONATHAN 405 LEXINGTON AVE., 54TH FLOOR NEW YORK, NY 10174
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE:  Date: 3/5/07 Daytime Phone: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE