

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M02000000668

1. Entity Name  
LB MERIDIAN LLC



Principal Place of Business  
745 7TH AVENUE  
NEW YORK, NY 10019

Mailing Address  
70 HUDSON STREET, 10TH FLOOR  
JERSEY CITY, NJ 07302

FILED

05 MAY -2 PM 3:02

SECRET  
TALLAHASSEE, FLORIDA



04182005 No Chg-LLC

CR2E083 (10/03)

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4. FEI Number  
NOT APPLICABLE

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE  
IN THIS SPACE**

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, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PAMI, LLC 745 7TH AVENUE NEW YORK, NY 10019
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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05/10/05--01100--001 \*\*\$200.00

**DO NOT WRITE  
IN THIS SPACE**

11. I 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 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: \_\_\_\_\_

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

Date

Daytime Phone #

Barry J. O'Brien 04/19/05 (201) 499-10604