

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED

Jul 20, 2007 08:00 AM
Secretary of State

DOCUMENT # M02000003024

1. Entity Name

CHARWEL TP LLC



Principal Place of Business

80 BROAD STREET
C/O BROADWAY MANAGEMENT CO
NEW YORK NY 10004

Mailing Address

80 BROAD STREET
C/O BROADWAY MANAGEMENT CO
NEW YORK NY 10004



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E083 (4/07)

4. FEI Number 11-3669452

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

Name

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

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 5, 2007

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME HERZKA, CHARLES
STREET ADDRESS 80 BROAD STREET
CITY-ST-ZIP NEW YORK NY 10004

TITLE
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CITY-ST-ZIP
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U00000763768
07/20/07-80004-005 50.00

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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:

Charles Herzka

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

7/17/07 (212) 493-7000

Date

Daytime Phone #