2006 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DOCUMENT # M02000003147

HK NEW PLAN SKYWAY PLAZA, LLC



Principal Place of Business

420 LEXINGTON AVE. 7TH FLOOR NEW YORK, NY 10170

Mailing Address

420 LEXINGTON AVE. 7TH FLOOR NEW YORK, NY 10170

FILED May 12, 2006 8:00 am Secretary of State

05-12-2006 90243 001 ***450.00

30008124



04142006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 36-4514304

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

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

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of char the obligations of registered agent.	nging its registered office or registered agent, or t	ooth, in the State of Florida.	I am familiar with, and accept
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)		DATE

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	SIEGEL, STEVEN F
STREET ADDRESS	420 LEXINGTON AVENUE, 7TH FLOOR
CITY-ST-ZIP	NEW YORK, NY 10170
TITLE	MGR
NAME	RUFRANO, GLENN J
STREET ADDRESS	420 LEXINGTON AVENUE, 7TH FLOOR
CITY-ST-ZIP	NEW YORK, NY 10170
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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TITLE.	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 receiper trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Steven F. Siegel

4/14/2006

212-869-3000