2008 LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT # M0400000474 1. Entity Name VENICE, FL RETAIL LLC Principal Place of Business 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022 Mailing Address 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022

FILED Apr 18, 2008 08:00 A Secretary of State

Applied For

212-753-4570

Daytime Phone #

Not Applicable



DO NOT WRITE IN THIS SPACE

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

6. Name and Address of Current Registered Agent

04042008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-0538247

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

DO NOT WRITE IN THIS SPACE

		IN THIS STACE
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 \$138.75 After May 1, 2008 Fee will be \$538.75		U00000905497 05/01/08-80055-009 138.75
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR R.Q. & S.W. MANAGER CORP 485 MAIDSON AVENUE, 24TH FLOOR NEW YORK, NY 10022	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filling 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. By: R.O. a.S. W. Manager 1996, Man. Member		