


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2007 08:00 A
Secretary of State

DOCUMENT # M04000000475 1. Entity Name ST. PETERSBURG, FL RETAIL LLC	
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Principal Place of Business 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022	Mailing Address 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022
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01292007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-0538231	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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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 R.O. & S.W. MANAGER CORP. 485 MADISON AVENUE, 24TH FLOOR NEW YORK, NY 10022
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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.

R.O. & S.W. Manager Corp, Man. Mgr.

SIGNATURE: *Olivia Rachel* *Vice President 4/27/07* *212-753-4522*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #