

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
05 JAN 27 AM 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M04000001959					
1. Entity Name LEISURA II ACQUISITION LLC					
Principal Place of Business 522 FIFTH AVENUE NEW YORK, NY 10036			Mailing Address 522 FIFTH AVENUE NEW YORK, NY 10036		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent 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 CT Corporation System				1/21/05	
Signature, typed or printed name of registered agent and title if applicable				(NOTE: Registered Agent signature required when reinstating)	
Filing Fee is \$50.00 Due by May 1, 2005				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE	MGR	☒ Delete	TITLE	MGR	☒ Change ☐ Addition
NAME	PFEIFFER, ANNE S		NAME	Broadway Mall Properties, Inc.	(Sole Member)
STREET ADDRESS	522 FIFTH AVENUE		STREET ADDRESS	522 Fifth Avenue	
CITY- ST- ZIP	NEW YORK, NY 10036		CITY- ST- ZIP	New York, NY 10036	
TITLE	MGR	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	GILBERTO, S. MICHAEL JR.		NAME		
STREET ADDRESS	522 FIFTH AVENUE		STREET ADDRESS		
CITY- ST- ZIP	NEW YORK, NY 10036		CITY- ST- ZIP		
TITLE	MGR	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	FAXON, KEVIN J		NAME		
STREET ADDRESS	522 FIFTH AVENUE		STREET ADDRESS		
CITY- ST- ZIP	NEW YORK, NY 10036		CITY- ST- ZIP		
TITLE	MGR	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	GIFFORD, BENJAMIN G		NAME		
STREET ADDRESS	522 FIFTH AVENUE		STREET ADDRESS		
CITY- ST- ZIP	NEW YORK, NY 10036		CITY- ST- ZIP		
TITLE	MGR	☒ Delete	TITLE		☐ Change ☐ Addition
NAME	DORT, ALFRED W		NAME		
STREET ADDRESS	522 FIFTH AVENUE		STREET ADDRESS		
CITY- ST- ZIP	NEW YORK, NY 10036		CITY- ST- ZIP		
TITLE		☒ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: 			Vice President & Secretary of Broadway Mall Properties, Inc.		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date		
			Daytime Phone #		



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032
REFERENCE : 169538 4302312
AUTHORIZATION : *Patricia Pigato*
COST LIMIT : \$ 50.00

ORDER DATE : January 27, 2005

ORDER TIME : 2:27 PM

ORDER NO. : 169538-010

CUSTOMER NO: 4302312

CUSTOMER: Ms. Bettina M. Chin
Stroock & Stroock & Lavan LLP
Suite 3520
180 Maiden Lane
New York, NY 10038-4982

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ANNUAL REPORT FILING

NAME: LEISURA II ACQUISITION LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward-EXT#2935

EXAMINER'S INITIALS: _____

RECEIVED
05 JAN 27 PM 4:05
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA