

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000003599

FILED
Mar 07, 2009
Secretary of State

Entity Name: SANDY LANE RETAIL LLC

Current Principal Place of Business:

C/O SANDY LANE LLC
2399 COLLINS AVENUE
MIAMI BEACH, FL 33139

New Principal Place of Business:

C/O SANDY LANE RETAIL LLC
2399 COLLINS AVENUE
MIAMI BEACH, FL 33139

Current Mailing Address:

100 RING ROAD WEST
SUITE 101
GARDEN CITY, NY 11530 US

New Mailing Address:

FEI Number: 03-0547811 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: DP () Delete
Name: ACHENBAUM, WILLIAM
Address: 100 RING ROAD WEST, SUITE 101
City-St-Zip: GARDEN CITY, NY 11530 US

Title: DT () Delete
Name: ACHENBAUM, MICHAEL
Address: 100 RING ROAD WEST, SUITE 101
City-St-Zip: GARDEN CITY, NY 11530 US

Title: DS () Delete
Name: KOSSMAN, MURRAY
Address: 100 RING ROAD WEST, SUITE 101
City-St-Zip: GARDEN CITY, NY 11530 US

Title: DIR () Delete
Name: TILLMAN, CARRIE L
Address: 100 RING ROAD WEST, SUITE 101
City-St-Zip: GARDEN CITY, NY 11530 US

Title: DIR () Delete
Name: STAWIKEY, MARY S
Address: 100 RING ROAD WEST, SUITE 101
City-St-Zip: GARDEN CITY, NY 11530 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MURRAY KOSSMAN

VP

03/07/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date