


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 06, 2006 08:00 AM
Secretary of State

DOCUMENT # M97000000774
 1. Entity Name
MIDWAY PLAZA GP LLC



Principal Place of Business C/O STERLING AMERICAN PROPERTY II L.P. 111 GREAT NECK ROAD, SUITE 408 GREAT NECK, NY 11021	Mailing Address C/O STERLING AMERICAN PROPERTY II L.P. 111 GREAT NECK ROAD, SUITE 408 GREAT NECK, NY 11021
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02222006 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 11-3406857	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
 UNITED CORPORATE SERVICES, INC.
 9200 SOUTH DADELAND BLVD.
 SUITE 508
 MIAMI, FL 33156-0000

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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 _____ DATE _____
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, 2006

1100000458922
 03/16/06-80048-014 50.00

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SAP II MANAGER INC. 111 GREAT NECK ROAD, SUITE 408 GREAT NECK, NY 11021
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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.

BY: *SAP II Manager Inc., Manager*
SIGNATURE: _____ **3/3/2006** _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

L. Thomas Osterman, M.P.