


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 17, 2007 8:00 am
Secretary of State

07-17-2007 90006 017 ***900.00

DOCUMENT # M98000001460	
1. Entity Name ERT 163RD STREET MALL, LLC	

Principal Place of Business 420 LEXINGTON AVE. 7TH FLOOR NEW YORK, NY 10170	Mailing Address 420 LEXINGTON AVE. 7TH FLOOR NEW YORK, NY 10170
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DO NOT WRITE IN THIS SPACE



07062007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 33-0831382	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DILL, R. JOSEPH ESQ
 ERACLIDES, JOHNS, HALL, GELMAN, ET AL
 4811 ATLANTIC BLVD.
 JACKSONVILLE, FL 32207

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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.

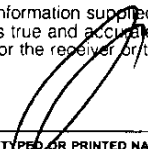
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00
Due by September 14, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUFANO, GLENN J 420 LEXINGTON AVENUE, 7TH FLOOR NEW YORK, NY 10170
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SIEGEL, STEVEN F 420 LEXINGTON AVENUE, 7TH FLOOR NEW YORK, NY 10170
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

SIGNATURE:  _____ Date: 7/6/2007 Daytime Phone #: 212-869-3000

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