

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Feb 12, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # M99000000128**  
 1. Entity Name  
 250 HAWTHORNE, L.C.



Principal Place of Business  
 60 BROAD ST  
 3503  
 NEW YORK, NY 10004

Mailing Address  
 60 BROAD ST  
 3503  
 NEW YORK, NY 10004

**DO NOT WRITE IN THIS SPACE**



01222007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number 11-3359720	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

JOSEPH, JERRY  
 100 GOLDEN ISLES DR., SUITE 1204  
 HALLANDALE, FL 33009

**DO NOT WRITE IN THIS SPACE**

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: *Shimon Eckstein*      *2/7/07*  
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	MGRM ECKSTEIN, SHIMON 60 BROAD STREET SUITE 3503 NEW YORK, NY 10004
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000632905  
 02/21/07-80040-021 50.00

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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: *Shimon Eckstein*      2/7/07      (212)667-04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #