


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

<b>DOCUMENT # L05000067173</b> 1. Entity Name PBG UNIT 24306, LLC	
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**FILED**  
**Jun 30, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business SCHULMAN,WOLFSON,PUCCI&ABRUZZO LLP 7 WEST 36TH ST., 15TH FLOOR NEW YORK, NY 10018	Mailing Address SCHULMAN,WOLFSON,PUCCI&ABRUZZO LLP 7 WEST 36TH ST., 15TH FLOOR NEW YORK, NY 10018
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06272008No Chg-LLC      CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-3307357	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

WEXLER, MARC  
 3740 SO. OCEAN BLVD., UNIT 1005  
 HIGHLAND BEACH, FL 33487

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

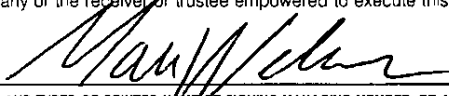
**FILE NOW!!! FEE IS \$138.75 Due by September 12, 2008**      In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	WEXLER, MARC
STREET ADDRESS	3740 SO. OCEAN BLVD., UNIT 1005
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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1000000953459  
 06/30/08-80002-033 138.75

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:**       **6/27/08**

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