

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F00000000023

1. Entity Name
PAMI-LEMB III INC.



FILED

07 MAY -9 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

[Signature]

Principal Place of Business

745 SEVENTH AVENUE
NEW YORK, NY 10019 US

Mailing Address

70 HUDSON STREET
JERSEY CITY, NJ 07302 US



04172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4088900

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|--|---|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD CHO, YON K 745 SEVENTH AVENUE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VS O'BRIEN, BARRY J 70 HUDSON ST JERSEY CITY, NJ 07302 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | V MCKENNA, CHRISTOPHER S 745 SEVENTH AVENUE NEW YORK, NY 10019 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |

400103022444
05/22/07--01035--001 **6900.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Barry J. O'Brien

04/17/07

(201) 499 6899

Date

Daytime Phone #