

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000001916

Entity Name: PAOMAR INC.

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

C/O GC CONSULTANTS
444 MADISON AVENUE
NEW YORK, NY 10022

New Principal Place of Business:

Current Mailing Address:

C/O BRUCE LEVINSON
747 THIRD AVE., 4TH FLOOR
NEW YORK, NY 100172803

New Mailing Address:

FEI Number: 20-0849162

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BORRA, GIANNI M
Address: 444 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: V () Delete
Name: BORRA, PAOLA
Address: 444 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

Title: S () Delete
Name: LEVINSON, BRUCE
Address: 747 THIRD AVENUE, 4TH FLOOR
City-St-Zip: NEW YORK, NY 100172803

Title: T () Delete
Name: BRUSA, GIUSEPPE
Address: 444 MADISON AVENUE
City-St-Zip: NEW YORK, NY 10022

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRUCE LEVINSON

SECR

01/04/2007

Electronic Signature of Signing Officer or Director

_____ Date