2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 17, 2008 08:00 A Secretary of State

	INACNIT	# 500	0000031	60
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1. Entity Name PAMI-FL10 INC.



Principal Place of Business

Mailing Address

745 SEVENTH AVENUE NEW YORK, NY 10019 70 HUDSON ST JERSEY CITY, NJ 07302



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03252008 No Chg-P

ha-P Ci

CR2E034 (11/05)

4. FEI Number 22-3635244

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

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the obligations of registered agent.	
SIGNATURE	
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstailing	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10.	OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P 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	AS GUTH, AARON J 745 SEVENTH AVENUE NEW YORK, NY 10019	
TITLE NAME STREET ADDRESS CATY-ST-ZIP	S BRIAN, BARRY 745 SEVENTH AVENUE NEW YORK, NY 10019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHO, YON K 745 SEVENTH AVENUE NEW YORK, NY 10019	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

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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 THE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

14/03/08

2011-199-16664

Daytime Phone #