

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F99000001256

1. Entity Name
PAMI PABLO BEACH INC.



FILED

07 MAY -9 PM 3:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
745 7TH AVE
NEW YORK, NY 10019

Mailing Address
70 HUDSON ST.
10TH FLOOR
JERSEY CITY, NJ 07302

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04172007 Chg-P CR2E034 (12/06)

4. FEI Number
13-4074720

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
D
MCKENNA, CHRISTOPHER S ☐ Delete
STREET ADDRESS
745 7TH AVE
CITY-ST-ZIP
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
200103022612
05/22/07--01035--001 **\$900.00

TITLE
NAME
V
O'BRIEN, BARRY J ☐ Delete
STREET ADDRESS
101 HUDSON ST
CITY-ST-ZIP
JERSEY CITY, NJ 07302

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
AT
BOPP FLYNN, KATHERINE M ☐ Delete
STREET ADDRESS
745 7TH AVE
CITY-ST-ZIP
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
S
MARRE, JENNIFER ☒ Delete
STREET ADDRESS
745 7TH AVE
CITY-ST-ZIP
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
D
FLANNERY, JOSEPH J ☐ Delete
STREET ADDRESS
745 7TH AVE
CITY-ST-ZIP
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
P
BLAKELY, KAREN ☐ Delete
STREET ADDRESS
745 7TH AVE
CITY-ST-ZIP
NEW YORK, NY 10019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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 #