

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013278

**FILED**  
**Feb 06, 2007**  
**Secretary of State**

**Entity Name:** PILOTCO, LLC

**Current Principal Place of Business:**

15001 N.W. 42ND AVENUE, BUILDING 45  
STE 113  
OPA LOCKA, FL 33054

**New Principal Place of Business:**

**Current Mailing Address:**

2060 BISCAYNE BLVD., 2ND FLOOR  
MIAMI, FL 33137

**New Mailing Address:**

FEI Number: 65-1057082

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

KRIEGER, STANLEY ESQUIRE  
2060 BISCAYNE BOULEVARD, 2ND FLOOR  
MIAMI, FL 33137 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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BRAMAN, NORMAN  
Address: 2060 BISCAYNE BLVD., 2ND FLOOR  
City-St-Zip: MIAMI, FL 33137

Title: S ( ) Delete  
Name: KRIEGER, STANLEY J  
Address: 2060 BISCAYNE BLVD 2ND FLR  
City-St-Zip: MIAMI, FL 33137

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic 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: NORMAN BRAMAN

MGR

02/06/2007

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date