

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90374 042 ****50.00

DOCUMENT # L02000025836		
1. Entity Name PR-PCI, LC		
Principal Place of Business 666 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442		Mailing Address 666 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442

60038959



2. Principal Place of Business - No P.O. Box # 333 NE 2nd St Suite, Apt. #, etc.		3. Mailing Address 333 NE 2nd St Suite, Apt. #, etc.		04032007	Chg-LLC	CR2E083 (12/06)
City & State Delray Beach FL		City & State Delray Beach, FL		4. FEI Number 16-1632677		Applied For ☐ Not Applicable
Zip 33483	Country USA	Zip 33483	Country USA	5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required		

6. Name and Address of Current Registered Agent COREN, GEORGE 666 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442		7. Name and Address of New Registered Agent Name George Coren Street Address (P.O. Box Number is Not Acceptable) 333 NE 2nd St City Delray Beach FL Zip Code 33483	
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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 George J. Coren George J. Coren 4/19/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2007**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PORTEN HOLDINGS, INC. % SCOTT PORTEN/666 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	333 NE 2nd St ☒ Change ☐ Addition Delray Beach FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PORTEN, SCOTT 666 S. MILITARY TRAIL DEERFIELD BEACH, FL 33442 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Porten, Scott ☒ Change ☐ Addition 333 NE 2nd St Delray Beach FL 33483
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	333 NE 2nd St ☐ Change ☐ Addition Delray Beach, FL 33483
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11. 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: George J. Coren 4/19/07 561 819
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 1109