

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030456

FILED
Jul 09, 2004
Secretary of State

Entity Name: PETRA COMFY, LLC

Current Principal Place of Business:

620 WASHINGTON AVENUE
CARLSTADT, NJ 07072

New Principal Place of Business:

Current Mailing Address:

620 WASHINGTON AVENUE
CARLSTADT, NJ 07072

New Mailing Address:

FEI Number: 11-3668254

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TEPPER, JACOB
2557 NW 63RD STREET
BOCA RATON, FL 33496 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/MEMBERS:

Title: CEO () Delete
Name: TEPPER, JACOB
Address: 2557NW 63RD ST.
City-St-Zip: BOCA RATON, FL 33496

Title: COO () Delete
Name: MENDAL, STEVEN
Address: 422 EAST 72ND ST.
City-St-Zip: NEW YORK, NY 10021

Title: P () Delete
Name: TRIANDAFELLOS, DEAN
Address: 61 AMSTERDAM DR.
City-St-Zip: FREEHOLD, NJ 07728

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TEPPER, JACOB
Address: 2557NW 63RD ST.
City-St-Zip: BOCA RATON, FL 33496

Title: MGR (X) Change () Addition
Name: MENDAL, STEVEN
Address: 422 EAST 72ND ST.
City-St-Zip: NEW YORK, NY 10021

Title: MGR (X) Change () Addition
Name: TRIANDAFELLOS, DEAN
Address: 61 AMSTERDAM DR.
City-St-Zip: FREEHOLD, NJ 07728

Title: MGR () Change (X) Addition
Name: REID, MICHAEL
Address: 620 WASHINGTON STREET
City-St-Zip: CARLSTADT, NJ 07072

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL REID

MGR

07/09/2004

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