

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000033185

FILED
Jan 14, 2009
Secretary of State

Entity Name: PASKOW MANAGEMENT COMPANY, LLC

Current Principal Place of Business:

102 MRACK ROAD
DANVILLE, CA 94506

New Principal Place of Business:

Current Mailing Address:

102 MRACK ROAD
DANVILLE, CA 94506

New Mailing Address:

FEI Number: 13-4226056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PASKOW, GEOFFREY B
19900 E. COUNTRY CLUB DR
#316
AVENTURA, FL 33418 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: MGRM () Delete
Name: PASKOW, GEOFFREY B
Address: 19900 E. COUNTRY CLUB DR. #316
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: PASKOW, IRA B
Address: 2926 WESTBROOK
City-St-Zip: WESTON, FL 33332

Title: MGRM () Delete
Name: PASKOW, MICHAEL B
Address: 102 MRACK ROAD
City-St-Zip: DANVILLE, CA 94506

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: PASKOW, IRA B
Address: 102 MRACK RD.
City-St-Zip: DANVILLE, CA 94506

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL B. PASKOW

MGRM

01/14/2009

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