


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90074 033 ****50.00

DOCUMENT # L02000034259 1. Entity Name PMLF REALTY, LLC					
Principal Place of Business 7800 TALAVERA PLACE DELRAY BEACH, FL 33446			Mailing Address 1090 BRISTOL ROAD MOUNTAINSIDE, NJ 07092		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent REDGRAVE & TURNER LLP 120 EAST PALMETTO PARK ROAD STE. 450 BOCA RATON, FL 33432			7. Name and Address of New Registered Agent Name Redgrave & Rosenthal LLP Street Address (P.O. Box Number is Not Acceptable) 120 East Palmetto Park Road, Suite 450 City Boca Raton FL 33432		
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 <u><i>Shelly Wald Schwartz</i></u> DATE <u>1/24/06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FRIEDMAN, LOUIS 1090 BRISTOL RD MOUNTAINSIDE, NJ 07092 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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 is true and accurate and that my 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: <u><i>[Signature]</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			3-22-06 9089281733 <small>Date Daytime Phone #</small>		