

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

04-23-2007 90374 047 ****50.00

DOCUMENT # L03000001057

1. Entity Name
CHAMBORD PCI, LC



60038954



Principal Place of Business
**666 S. MILITARY TRAIL
C/O PORTEN COMPANIES, INC.
DEERFIELD BEACH, FL 33442**

Mailing Address
**666 S. MILITARY TRAIL
C/O PORTEN COMPANIES, INC.
DEERFIELD BEACH, FL 33442**

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**
Zip **33483** Country **USA**

4. FEI Number
52-2264537
Applied For
Not Applicable

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**

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** **4/19/07**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

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

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **PORTEN HOLDINGS INC**
STREET ADDRESS **666 SOUTH MILITARY TRAIL**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE **MGR** ☐ Delete
NAME **PORTEN, SCOTT**
STREET ADDRESS **666 S. MILITARY TRAIL**
CITY-ST-ZIP **DEERFIELD BEACH, FL 33442**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME **333 NE 2nd St**
STREET ADDRESS **Delray Beach FL 33483**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
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STREET ADDRESS **Delray Beach FL 33483**
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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** **561-819-1109**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #