

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000053071

Entity Name: PMJ ACQUISITIONS, LLC.

FILED
Apr 15, 2006
Secretary of State

Current Principal Place of Business:

80 CEDAR CIRCLE
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

Current Mailing Address:

80 CEDAR CIRCLE
BOYNTON BEACH, FL 33436 US

New Mailing Address:

FEI Number: 20-1373579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HYDE, HENRY J
80 CEDAR CIRCLE
BOYNTON BEACH, FL 33436 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: MGR () Delete
Name: LEPAK, PATRICK W
Address: 7306 DREXLER ROAD
City-St-Zip: ST. CLAIR, MI 48079 US

Title: MGR () Delete
Name: O'ROURKE, MARTIN G
Address: 4045 NW 87TH. AVENUE
City-St-Zip: SUNRISE, FL 33351 US

Title: MGR () Delete
Name: HYDE, HENRY J
Address: 80 CEDAR CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33436 US

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: O'ROURKE, MARTIN G
Address: 4327 REFLECTIONS BLVD. #203
City-St-Zip: SUNRISE, FL 33351 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: HENRY J. HYDE

MGR

04/15/2006

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