

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 13, 2007 8:00 am
Secretary of State

04-13-2007 90035 006 ****50.00

DOCUMENT # L04000061454

1. Entity Name
PAMRO, LLC



Principal Place of Business

~~23 KINGSBRIDGE WAY~~ 318 Boston Post Rd
MADISON, CT 06443

Mailing Address

~~23 KINGSBRIDGE WAY~~
MADISON, CT 06443

318 Boston Post Road

DO NOT WRITE IN THIS SPACE



04022007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
14-1918070

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, FROHMAN
1236 HILLSBORO MILE, APT. 501
HILLSBORO BEACH, FL 33062

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ROSENBERG, JEFFREY
STREET ADDRESS ~~23 KINGSBRIDGE WAY~~ 318 Boston Post Road
CITY-ST-ZIP MADISON, CT 06443

TITLE MGRM
NAME DAVIS, FROHMAN
STREET ADDRESS 1236 HILLSBORO MILE, APT. 501
CITY-ST-ZIP HILLSBORO BEACH, FL 33062

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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:

Jeffrey Rosenberg

4/12/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #