2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070015

Entity Name: PRIME GULF ENTERPRISES LLC

519 HAWTHORNE PLACE

BERWYN, PA 19312

Address:

City-St-Zip:

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	RENTON AVE.				
SUITE #4 MORRISVILLE, PA 19067					
MORRISV	ILLE, PA 1900	'			
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
833 W. TR SUITE #4	RENTON AVE.				
MORRISV	ILLE, PA 1906	7			
FEI Number	: 20-1663563	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
CORPDIRECT AGENTS INC. 515 E. PARK AVE. TALLAHASSEE, FL 32301 US			CASTALDO, ANTHONY 10449 WASHINGTONIA PALM WAY FT. MYERS, FL 33966 US		
	named entity see of Florida.	submits this statement for the p	ourpose of changing its register	ed office or registered agent, or both,	
SIGNATURE: ANTHONY CASTALDO				04/27/2007	
	Electror	ic Signature of Registered Ag	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	MGRM () SCHAUTZ, JOH 126 PONDERO HOLLAND, PA	SA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete DREYER, EDWARD F 437 GOLDEN GATE DRIVE RICHBORO, PA 18954		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () DAVIS, WAYNE 2319 E. VINE S HATFIELD, PA	TREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () MCCABE, PAU	Delete	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JOHN SCHAUTZ MGRM 04/27/2007