

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 13, 2008 08:00 AM
Secretary of State

DOCUMENT # L05000001677

1. Entity Name
PMC INVESTMENTS LLC



Principal Place of Business

**7901 W 25TH AVE, # 3
HIALEAH, FL 33016**

Mailing Address

**7901 W 25TH AVE, # 3
HIALEAH, FL 33016**



01082008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-2139975

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**RAFULS, RICHARD
7901 W 25TH AVE, # 3
HIALEAH, FL 33016**

**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

**FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75**

U00000856755

03/22/08 20024-021-138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	RAFULS, RICHARD
STREET ADDRESS	7901 W 25 AVE., BAY #3
CITY-ST-ZIP	HIALEAH, FL 33016
TITLE	MGRM
NAME	MARRERO, HECTOR
STREET ADDRESS	7901 W. 25 AVE., BAY #3
CITY-ST-ZIP	HIALEAH, FL 33016
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

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

Date

Daytime Phone #