

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016845

Entity Name: PFX PET SUPPLY LLC

FILED
Jan 25, 2008
Secretary of State

Current Principal Place of Business:

3885 SEAPORT BLVD
SUITE 10
W SACRAMENTO, CA 95691

New Principal Place of Business:

Current Mailing Address:

266 SOUTH COCONUT LANE
MIAMI BEACH, FL 33139

New Mailing Address:

FEI Number: 16-1719570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLAN M. LERNER, PA
2888 E. OAKLAND PARK BLVD.
FT. LAUDERDALE, FL 33306 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: LEVINE, BERN M
Address: 266 S COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGMM () Delete
Name: LEVINE, MARY H
Address: 266 S COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 33139

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LEVINE, BERN M
Address: 266 S COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM (X) Change () Addition
Name: LEVINE, MARY H
Address: 266 S COCONUT LANE
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGR () Change (X) Addition
Name: KRONGOLD, RONNIE
Address: 1111 PARROT JUNGLE TRAIL
City-St-Zip: MIAMI, FL 33132

Title: VP () Change (X) Addition
Name: JUSKA, ANDREW
Address: 1111 PARROT JUNGLE TRAIL
City-St-Zip: MIAMI, FL 33132

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.

SIGNATURE: MARY H LEVINE

MGRM

01/25/2008

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