

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000028466

Entity Name: PITT ENTERPRISES, LLC

FILED
Jul 15, 2007
Secretary of State

Current Principal Place of Business:

5271 NW 14TH PLACE
LAUDERHILL, FL 33313

New Principal Place of Business:

3811 16TH STREET SW
LEHIGH ACRES, FL 33971

Current Mailing Address:

487 GOFFLE RD
RIDGEWOOD, NJ 07631

New Mailing Address:

38 HAROLD ST
TENAFLY, NJ 07670

FEI Number: 20-2585885 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PITT, HAMBERT W
5271 NW 14TH PLACE
LAUDERHILL, FL 33313 US

Name and Address of New Registered Agent:

PITT, HAMBERT W
3811 16TH STREET SW
LEHIGH ACRES, FL 33971 US

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: _____

07/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: PITT, IAN R
Address: 266 TENAFLY RD
City-St-Zip: ENGLEWOOD, NJ 07631

Title: MGR () Delete
Name: PITT, HAMBERT W
Address: 5271 NW 14TH PLACE
City-St-Zip: LAUDERHILL, FL 33313

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: PITT, HAMBERT W
Address: 3811 16TH STREET SW
City-St-Zip: LEHIGH ACRES, FL 33971

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: IAN PITT

MGRM

07/15/2007

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