

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063809

FILED
Jan 29, 2006
Secretary of State

Entity Name: PAM LEVINE ENTERPRISES LLC

Current Principal Place of Business:

C/O THE PRIVATEER SOUTH
1000 LONGBOAT CLUB ROAD, UNIT #605
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

C/O THE PRIVATEER SOUTH
1000 LONGBOAT CLUB ROAD, UNIT #605
LONGBOAT KEY, FL 34228

New Mailing Address:

7477 NORTHFIELD LANE
MANLIUS, NY 13104

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEVINE, PAMELA
C/O THE PRIVATEER SOUTH
1000 LONGBOAT CLUB ROAD, UNIT #605
LONGBOAT KEY, FL 34228 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, PAMELA
Address: 1000 LONGBOAT CLUB ROAD, UNIT #605
City-St-Zip: LONGBOAT KEY, FL 34228

Title: MGR () Delete
Name: LEVINE, EDWARD
Address: 1000 LONGBOAT CLUB ROAD, UNIT #605
City-St-Zip: LONGBOAT KEY, FL 34228

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: PAMELA LEVINE

MGR

01/29/2006

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