


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000076251</b> 1. Entity Name P.SHAMBORA & CO., LLC	
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Principal Place of Business 3020 N. 34TH STREET HOLLYWOOD, FL 33021	Mailing Address 3020 N. 34TH STREET HOLLYWOOD, FL 33021
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**DO NOT WRITE IN THIS SPACE**



01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0221113	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  FISCHER, REBECCA H 1930 HARRISON STREET, SUITE 209 HOLLYWOOD, FL 33020
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

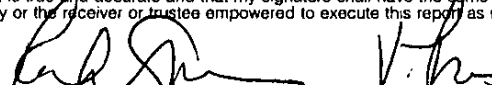
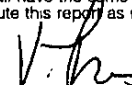
**Filing Fee Is \$50.00  
Due by May 1, 2007**

U000000706458  
04/24/07-80034-020 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHAMBORA, PAUL 3020 N. 34TH STREET HOLLYWOOD, FL 33021
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SHAMBORA, RICKI 3020 N. 34TH STREET HOLLYWOOD, FL 33021
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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: 4/10/07 Daytime Phone #: 954-327-3082