


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 11, 2007 8:00 am
Secretary of State

05-11-2007 90194 011 ****50.00

DOCUMENT # L05000084561

1. Entity Name
 PARAMOUNT LACUNA, LLC



Principal Place of Business 5000 T-REX AVENUE, SUITE 150 BOCA RATON, FL 33431	Mailing Address 5000 T-REX AVENUE, SUITE 150 BOCA RATON, FL 33431
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DO NOT WRITE IN THIS SPACE



01092007No Chg-LLC CR2E083 (11/05)

4. FEI Number 41-2184598	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ROTHMAN, FRED B
 5000 T-REX AVENUE, SUITE 150
 BOCA RATON, FL 33431

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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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PARAMOUNT BOCA, LLC 5000 T-REX AVENUE 150 BOCA RATON, FL 33431
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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 *Bruce S. Grundt* MEMBER of PARAMOUNT BOCA, LLC
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE *Bruce S. Grundt* Date *4/24/07* Daytime Phone # *(561) 998-9200*