

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 05, 2007  
Secretary of State**

DOCUMENT# L06000046472

Entity Name: P.R.C. INVESTMENTS, LLC

**Current Principal Place of Business:**

202 NEW CANAAN AVENUE  
NORWALK, CT 06850 US

**New Principal Place of Business:**

**Current Mailing Address:**

202 NEW CANAAN AVENUE  
NORWALK, CT 06850 US

**New Mailing Address:**

FEI Number: 20-4818856      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

PORAT, RON  
7505 ALLOWAY STREET  
TAMPA, FL 33625 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: MGRM ( ) Delete  
Name: CIMITILE, ROBERT A  
Address: 202 NEW CANAAN AVENUE  
City-St-Zip: NORWALK, CT 06850 US

Title: MGRM ( ) Delete  
Name: CIMITILE, PATRICIA A  
Address: 202 NEW CANAAN AVENUE  
City-St-Zip: NORWALK, CT 06850 US

**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: ROBERT A. CIMITILE

MGRN

04/05/2007

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