2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069925

Entity Name: VROJJERM GROUP, LLC

E. STROUDSBURG, PA 18301 US

City-St-Zip:

FILED Sep 05, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1864 NW 140 TERRACE PEMBROKE PINES, FL 33028 US **Current Mailing Address: New Mailing Address:** 1864 NW 140 TERRACE PEMBROKE PINES, FL 33028 US FEI Number: 20-5206249 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: Name and Address of New Registered Agent: PLUVIOSE, ODET 1864 NW 140 TERRACE PEMBROKE PINES, FL 33028 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete REVEIL, ROOSEVELT Name: Name: **52 NE 187 STREET** Address: Address: City-St-Zip: NORTH MIAMI, FL 33179 US City-St-Zip: Title: MGR Title: () Delete () Change () Addition ARIOL, MYREILLE Name: Name: Address: 1858 NW 139 TERRACE Address: City-St-Zip: PEMBROKE PINES, FL 33028 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition HIPPOLYTE, MARTHELLY Name: Name: Address: 1163 EAST 84 STREET Address: City-St-Zip: BROOKLYN, NY 11236 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition PLUVIOSE, RODRIGUE J SR Name: Name: Address: 179 GREEN STREET Address: City-St-Zip: VALLEY STREAM, NY 11580 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition PIQUANT, ROSE V Name: Name: 28 PAERDIGAT 8TH STREET Address: Address: BROOKLYN, NY 11236 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition PLUVIOSE, JOSETTE Name: Name: Address: 401 WILDWOOD CT Address:

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.

City-St-Zip:

SIGNATURE: RODRIGUE PLUVIOSE MGR 09/05/2007