



# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 30, 2008 8:00 am**  
**Secretary of State**

04-30-2008 90029 044 \*\*\*138.75

<b>DOCUMENT # L07000025694</b> 1. Entity Name <b>PMK HOLDINGS VIII, LLC</b>					
Principal Place of Business <b>1498 N.W. 3RD STREET DEERFIELD BEACH, FL 33442</b>			Mailing Address <b>1498 N.W. 3RD STREET DEERFIELD BEACH, FL 33442</b>		
2. Principal Place of Business - No P.O. Box # <b>1388 SW 8th St</b>		3. Mailing Address <b>1388 SW 8th St</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <b>Pompano Beach</b>		City & State <b>Pompano Beach FL</b>		4. FEI Number <b>20-8287303</b>	
Zip <b>33069</b>		Country <b>Broward</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
Zip <b>33069</b>		Country <b>Broward</b>		6. Name and Address of Current Registered Agent <b>HERSHKOWITZ, PAUL 1498 N.W. 3RD STREET DEERFIELD BEACH, FL 33442</b>	
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>1388 SW 8th St</b> City <b>Pompano Beach</b>		State <b>FL</b>			
Zip Code <b>33069</b>		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  DATE <b>4/29/08</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75</b>			Make check payable to <b>Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE <b>MGR</b>	NAME <b>HERSHKOWITZ, PAUL</b>		<input type="checkbox"/> Delete		
STREET ADDRESS <b>1498 N.W. 3RD STREET</b>	CITY - ST - ZIP <b>DEERFIELD BEACH, FL 33442</b>		TITLE <b>1388 SW 8th Street</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS <b>1498 N.W. 3RD STREET</b>	CITY - ST - ZIP <b>DEERFIELD BEACH, FL 33442</b>		STREET ADDRESS <b>Pompano Beach FL 33069</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
CITY - ST - ZIP <b>DEERFIELD BEACH, FL 33442</b>	<input type="checkbox"/> Delete		CITY - ST - ZIP <b>Pompano Beach FL 33069</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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.					
<b>SIGNATURES</b> 			<b>4/29/08 9547823600</b>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		