

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000057164

FILED
Apr 30, 2008
Secretary of State

Entity Name: PACURON ENTERPRISES, LLC

Current Principal Place of Business:

100 ALLEN LANE
MELBOURNE, FL 32951 US

New Principal Place of Business:

Current Mailing Address:

C/O DEBORAH PACULA
8209 N. PINE ISLAND RD #150
TAMARAC, FL 33321 US

New Mailing Address:

FEI Number: 26-0260512 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RONDEAU, DEBORAH
C/O DEBORAH PACULA
8209 N PINE ISLAND RD #150
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

RONDEAU, DEBORAH CEO
C/O DEBORAH PACULA
8209 N PINE ISLAND RD #150
TAMARAC, FL 33321 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: DEBORAH PACULA

04/30/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: RONDEAU, DEBORAH
Address: C/O D. PACULA, 8209 N PINE ISLAND RD, #150
City-St-Zip: TAMARAC, FL 33321 US

Title: MGRM () Delete
Name: RONDEAU, PETER
Address: C/O D. PACULA, 8209 N PINE ISLAND RD, #150
City-St-Zip: TAMARAC, FL 33321 US

ADDITIONS/CHANGES:

Title: CEO (X) Change () Addition
Name: RONDEAU, DEBORAH
Address: C/O D. PACULA, 8209 N PINE ISLAND RD, #150
City-St-Zip: TAMARAC, FL 33321 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: DEBORAH PACULA

CEO

04/30/2008

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