2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

Apr 27, 2005 8:00 am Secretary of State **DOCUMENT # M04000002692** 04-27-2005 90028 018 ****50.00 1. Entity Name PP&P EQUITIES, LLC Principal Place of Business Mailing Address たいいがいいい 1610 NEW HIGHWAY 1610 NEW HIGHWAY FARMINGDALE, NY 11735 FARMINGDALE, NY 11735 04202005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0428576 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE NAME POSILLICO, MARIO A 1610 NEW HIGHWAY STREET ADDRESS CITY-ST-ZIP FARMINGDALE, NY 11735 MGR TILE PASCUCCI, ROBERT M NAME STREET ADDRESS **277 NORTHERN BOULEVARD** GREAT NECK, NY 11021 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY - ST - ZIP TILLE STREET ADDRESS

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

Davtime Phone 6