

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000002799

FILED  
Jan 03, 2008  
Secretary of State

Entity Name: PORTFOLIO REAL ESTATE PALM BAY, LLC

## Current Principal Place of Business:

% LAKESTAR MANAGEMENT  
4583 HIGHWAY 9 NORTH  
HOWELL, NJ 07731

## New Principal Place of Business:

## Current Mailing Address:

% LAKESTAR MANAGEMENT  
4583 HIGHWAY 9 NORTH  
HOWELL, NJ 07731

## New Mailing Address:

FEI Number: 20-4624890

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC  
515 EAST PARK AVE  
TALLAHASSEE, FL 32301 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: MGR ( ) Delete  
Name: FRANKEL, MENASHE  
Address: 4583 HWY 9, NORTH  
City-St-Zip: HOWELL, NJ 07731

Title: MGR ( ) Delete  
Name: FRANKEL, YECHESKEL  
Address: 4583 HWY 9, NORTH  
City-St-Zip: HOWELL, NJ 07731

Title: MGR ( ) Delete  
Name: THAU, SHIRA  
Address: 4583 HWY 9, NORTH  
City-St-Zip: HOWELL, NJ 07731

Title: MGR ( ) Delete  
Name: JACOBI, BRUCE  
Address: 225 WEST 34TH STREET  
City-St-Zip: NEW YORK, NY 10122

Title: MGR ( ) Delete  
Name: DEVRIES, COLLEEN  
Address: 225 WEST 34TH STREET  
City-St-Zip: NEW YORK, NY 10122

## ADDITIONS/CHANGES:

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

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

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

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 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: MENASHE FRANKEL

MR

01/03/2008

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