2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 24, 2007 08:00 AM
Secretary of State

DOCUMENT # M06000003220

1. Entity Name
PYRAMID ETC COMPANIES LLC

Principal Place of Business	Mailing Address
275 NORTH FRANKLIN TURNPIKE RAMSEY, NJ 07446	275 NORTH FRANKLIN TURNPIKE RAMSEY, NJ 07446

DO NOT WRITE IN THIS SPACE

07052007 No Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0072875

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

COLEMAN, RONALD
7410 ORANGEWOOD LANE
BOCA RATON, FL 33433

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 14, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	BUTWIN, ROBERT
STREET ADDRESS	275 NORTH FRANKLIN TURNPIKE
CITY-ST-ZIP	RAMSEY, NJ 07446
TITLE	MGR
NAME	COLEMAN, BRAD
STREET ADDRESS	275 NORTH FRANKLIN TURNPIKE
CITY-ST-ZIP	RAMSEY, NJ 07446
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	

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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.

SIGNATURE: _____ 7/18/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Ronald Coleman Robert Butwin 201-327-1919