

**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	
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Principal Place of Business 275 NORTH FRANKLIN TURNPIKE RAMSEY, NJ 07446	Mailing Address 275 NORTH FRANKLIN TURNPIKE RAMSEY, NJ 07446
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DO NOT WRITE IN THIS SPACE



07052007No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0072875	Applied For Not Applicable
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5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent COLEMAN, RONALD 7410 ORANGEWOOD LANE BOCA RATON, FL 33433
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**DO NOT WRITE
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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

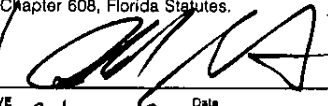
**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BUTWIN, ROBERT 275 NORTH FRANKLIN TURNPIKE RAMSEY, NJ 07446
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COLEMAN, BRAD 275 NORTH FRANKLIN TURNPIKE RAMSEY, NJ 07446
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07/24/07-80010-005 55.00

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
Ronald Coleman Robert Butwin Date 7/18/07 Daytime Phone # 201-327-1919