



2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2008 08:00 AM
Secretary of State

DOCUMENT # M07000001633	
1. Entity Name PSKW, LLC	

Principal Place of Business ONE EAST BROWARD BLVD., SUITE 700 FORT LAUDERDALE, FL 33301	Mailing Address ONE EAST BROWARD BLVD., SUITE 700 FORT LAUDERDALE, FL 33301
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DO NOT WRITE IN THIS SPACE



03262008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-3058721	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SYMONS, W. SCOTT
ONE EAST BROWARD BLVD., SUITE 700
FORT LAUDERDALE, FL 33301

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000875479
04/11/08-80034-020 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SYMONS, W. SCOTT 2565 OCEAN BLVD., #109N HIGHLAND BEACH, FL 33487
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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: W Scott Symons Date: 3/26/08 Daytime Phone #: 732-650-0944

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #