

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Apr 08, 2005 08:00 AM  
Secretary of State

DOCUMENT # M95000000228

1. Entity Name  
PONJEB III, L.L.C. LIMITED COMPANY



Principal Place of Business  
C/O CARCO GROUP, INC.  
17 FLOWERFIELD INDUSTRIAL PARK  
ST. JAMES, NY 11780

Mailing Address  
C/O CARCO GROUP, INC.  
17 FLOWERFIELD INDUSTRIAL PARK  
ST. JAMES, NY 11780



04072005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
11-3274255

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET, SUITE 105  
TALLAHASSEE, FL 32301

**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 May 1, 2005**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
O'NEILL, PETER L  
C/O 17 FLOWERFIELD INDUSTRIAL PARK  
ST. JAMES, NY 11780

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
BEASLEY, JAMES E  
C/O 17 FLOWERFIELD INDUSTRIAL PARK  
ST. JAMES, NY 11780

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

04072005-00078-003 50.00

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/7/05

Date

631-862-9300

Daytime Phone #