## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 27, 2007 08:00 AM Secretary of State DOCUMENT # P97000099191 1. Entity Name PMLR, INC. Principal Place of Business Malling Address 999 S.W. 38TH STREET 999 S.W. 38TH STREET PALM CITY, FL 34990 PALM CITY, FL 34990 02072007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0799860 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent APPEL, LAURA DO NOT WRITE 999 S.W. 38TH STREET PALM CITY, FL 34990 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS PS TITLE APPEL, LAURA STREET ADDRESS 999 S.W. 38TH STREET PALM CITY, FL 34990 CITY-ST-ZiP U00000736244 05/10/07-80069-009 150.00 DT TITLE APPEL, LAURA 999 S.W. 38TH STREET STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-7IP

GNATURE AND TYPED OR PRIMED NAME ON SIGNING OFFICER OR DIRECTOR

4/24/07

172-220-4466

Daytime Phone #

**FILED**