


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 11, 2007 08:00 AM
Secretary of State

DOCUMENT # L04000044646
 1. Entity Name
PINNACLE PROPERTIES INTERNATIONAL, LLC



Principal Place of Business 901 S. GOLFVIEW ST. TAMPA, FL 33629	Mailing Address 901 S. GOLFVIEW ST. TAMPA, FL 33629
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01082007 No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1245249	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
**DUNSFORD, TINA
 100 S ASHLEY DR, STE 1500
 TAMPA, FL 33602**

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

**Filing Fee is \$50.00
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES DIASTI, SAM MR. 901 S. GOLFVIEW ST. TAMPA, FL 33629
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DIASTI, RIHAM MRS. 901 S. GOLFVIEW ST. TAMPA, FL 33629
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 01/11/07-800003-018 50.00

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