## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # M01000002872

Entity Name

BIT INVESTMENT TWENTY-FIVE, LLC



Principal Place of Business

2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201 Mailing Address

2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201

## FILED Feb 15, 2006 8:00 am Secretary of State

02-15-2006 90131 029 \*\*\*\*50.00

20007972



## DO NOT WRITE IN THIS SPACE

01062006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number		Applied For
94-3413294	]	Not Applicable
E. Cadificate of Status Desired	 \$5.0	0 Additional

5. Certificate of Status Desired

Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

HIQ CORPORATE SERVICES 1574 VILLAGE SQUARE BLVD SUITE 100 TALLAHASSEE, FL 32309

the obligations of registered agent.

SIGNATURE:

DO	NOT	WRITE
IN	THIS	SPACE

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, 2006				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MERCANTILE-SAFE DEPOSIT & TRUST COMPANY 2 HOPKINS PLAZA, SUITE 804 BALTIMORE, MD 21201			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filling 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				

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