

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000008508

FILED  
Jan 10, 2006  
Secretary of State

Entity Name: PTA PROPERTY MANAGEMENT, LLC

## Current Principal Place of Business:

555 N.E. 15TH STREET, SUITE 213  
MIAMI, FL 33132

## New Principal Place of Business:

555 N.E. 15TH STREET  
SUITE 213  
MIAMI, FL 33132

## Current Mailing Address:

555 N.E. 15TH STREET, SUITE 213  
MIAMI, FL 33132

## New Mailing Address:

555 N.E. 15TH STREET  
SUITE 213  
MIAMI, FL 33132

FEI Number: 65-1053007

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

OTIS, PITTS JR  
555 NE 15TH STREET STE 213  
MIAMI, FL 33132 US

## Name and Address of New Registered Agent:

OTIS, PITTS JR  
555 NE 15TH STREET  
SUITE 213  
MIAMI, FL 33132 US

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.

SIGNATURE:

01/10/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: DIVERSIFIED MANAGEME, NT INTERNATIONAL L, INC.  
Address: 35 NE 40 ST.  
City-St-Zip: MIAMI, FL 33137

Title: MGRM ( ) Delete  
Name: WRP ASSOCIATES, INC.,  
Address: 9822 NE 2 AVE.  
City-St-Zip: NORTH MIAMI, FL 33138

Title: MGRM ( ) Delete  
Name: MASVIDAL PARTNERS, I, NC.  
Address: 2151 LEJEUNE RD., STE. 202  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: PENINSULA DEVELOPERS, , INC.  
Address: 555 NE 15 ST., STE. 213  
City-St-Zip: MIAMI, FL 33132

Title: MGRM ( ) Delete  
Name: TEJA ASSOCIATES, INC.,  
Address: P.O. BOX 601683  
City-St-Zip: MIAMI, FL 33160

Title: MGRM ( ) Delete  
Name: NINETY-NINE ACRES, I, NC.  
Address: 8260 N.W. 156 TERR.  
City-St-Zip: MIAMI, FL 33016

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: OTIS PITTS, JR.

MGR

01/10/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date