


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L01000004633</b> 1. Entity Name PEACHTREE TELEPRODUCTS, LLC	
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Principal Place of Business 1215 W. NEWPORT CTR. DR. DEERFIELD BEACH, FL 33442	Mailing Address 1215 W. NEWPORT CTR. DR. DEERFIELD BEACH, FL 33442
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01242006No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 58-2611757	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  MARKATIA, MOHAMMED A 1215 W. NEWPORT CTR. DR. DEERFIELD BEACH, FL 33442
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**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, 2006**

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	CEO MARKATIA, M.A. 1215 W. NEWPORT CTR. DR. DEERFIELD BEACH, FL 33442
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03/16/06-80012-016 55.00

**DO NOT WRITE  
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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 605, Florida Statutes.

SIGNATURE: Markatia

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

3/2/06

Date

984-418-8620

Daytime Phone #