2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 07, 2005 8:00 am Secretary of State 03-07-2005 90061 043 ****50.00

DOCUMENT # L01000015052 1. Entity Name PROPERTY ASSET MANAGEMENT, LLC				03-07-2005 90061 043 ****50.00			
Principal Place of Business		Mailing Address		₩AATAAAA			
300 PRIMERA BLVD., #356 LAKE MARY, FL 32746		300 PRIMERA BLVD., #356 Lake Mary, Fl. 32746		etter for their			
CAINE WAINT,	11 32/40	LANE MART, IE 32/40		1 (57)(67) 87) 67	1184 41811 88111 88111 881) 	IBBN 811 1861
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02022005	Chg-LLC	CR2E083 (10/03)	
City & State		City & State		4. FEI Number 59-3740	572		pplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of		S5.00 Ad	ditional
	6. Name and Address of Current F	Registered Agent		7. Name and A	ddress of New F	Registered Agent	<u>-</u>
		Name					
BURNS, PATRICK M. 1516 E. HILLCREST, SUITE 307 OPI ANDO EL 32803		Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO, FL 32803							
		City				FL Zip Coo	e
8. The above the obligat	named entity submits this statement for ions of registered agent.	the purpose of changing its re	egistered office or registe	ered agent, or both	, in the State of Fk	orida. I am familiar with	and accept
SIGNATURE .	100-	Mu				2-28-05	
	Signature, typed or printed dame of registered agent a	notate # applicable. (NOTE; F	Registered Agent signature require	ed when reinstating)		DATE	
Filing Fee is \$50.00 Due by May 1, 2005							
· Di	iling Fee is \$50.00 ue by May 1, 2005					te check payable to a Department of Stat	te .
· Di	iling Fee is \$50.00 ue by May 1, 2005 MANAGING MEMBEF	RS/MANAGERS	10.			a Department of Stat	te
9.	MANAGING MEMBER	RS/MANAGERS Delete	10.		Florid	a Department of Stat	te Addition
9. TITLE NAME	MANAGING MEMBER MGRM IRA, STEVEN D		TITLE NAME		Florid	A Department of State	· · · · ·
9. TITLE NAME STREET ADDRESS	MANAGING MEMBER MGRM IRA, STEVEN D 300 PRIMERA BLVD #356		TITLE NAME STREET ADDRESS		Florid	A Department of State	· · · · ·
9. TIILE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGRM IRA, STEVEN D 300 PRIMERA BLVD #356 LAKE MARY, FL 32746	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		Florid	a Department of State /CHANGES Change	Addition
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9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MANAGING MEMBER MGRM IRA, STEVEN D 300 PRIMERA BLVD #356 LAKE MARY, FL 32746 MGRM	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		Florid	a Department of State /CHANGES Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MANAGING MEMBER MGRM IRA, STEVEN D 300 PRIMERA BLVD #356 LAKE MARY, FL 32746 MGRM IRA, STEPHANIE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		Florid	a Department of State /CHANGES Change	☐ Addition
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I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is tree 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 repeiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPES OR FINTED NAME OF SIGNING MANA

Struch D Ira

407-995-400