### 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT\*# L02000003137

1. Entity Name
THE PENTATHLON GROUP, LLC



Principal Place of Business

13 S.W. 7TH STREET MIAMI, FL 33130 Mailing Address

13 S.W. 7TH STREET MIAMI, FL 33130

## FILED May 08, 2007 8:00 am Secretary of State

05-08-2007 90115 015 \*\*\*\*50.00

60043886



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01042007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 01-0600729

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Latterner, MICHAEL 13 S.W 7TH STREET MIAMI, FL 33130

# DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chaions of registered agent.	nging its registered office or registered agent, or both, in t	the State of Florida. I am familiar with, and accept	
SIGNATURE				
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent alignature required when reinstating)	DATE	
	iling Fee is \$50.00 ue by May 1, 2007	•	•	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LATTERNER, MICHAEL 13 S.W. 7TH STREET MIAMI, FL 33130			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARTINEZ, CARLOS EMILIO 11755 S.W. 90TH STREET, SUITE 210 MIAMI, FL 33186			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO N	OT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN TH	IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				

11. I hereby certify that the information and article 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 limited liability company or the receiver or trustee employees 17 prepared to the report as required by Chapter 608, Florida Statutes.

SIGNATURE:

DTYPED OR PRINTED NAME OF SIGNARY MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-23-0

305-372-1266

Daytime Phor