

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017161

FILED
Jan 26, 2006
Secretary of State

Entity Name: PINNACLE REAL ESTATE SERVICES, LLC

Current Principal Place of Business:

1250 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Principal Place of Business:

1740 EAST COMMERCIAL BLVD
FT LAUDERDALE, FL 33334

Current Mailing Address:

1250 N FEDERAL HIGHWAY
POMPANO BEACH, FL 33062

New Mailing Address:

1740 EAST COMMERCIAL BLVD
FT LAUDERDALE, FL 33334

FEI Number: 32-0049322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SABATINO, ADRIAN
3821 NE 27 AVE
LIGHTHOUSE POINT, FL 33064 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SABATINO, ADRIAN
Address: 1250 N FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGRM () Delete
Name: BURKEY, SHAWN
Address: 1250 N FEDERAL HIGHWAY
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SABATINO, ADRIAN
Address: 3821 NE 27 AVE
City-St-Zip: LIGHTHOUSE PT, FL 33064

Title: MGRM (X) Change () Addition
Name: BURKEY, SHAWN
Address: 3001 NE 47 STREET
City-St-Zip: LIGHTHOUSE PT, FL 33064

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: ADRIAN SABATINO

MGRM

01/26/2006

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