

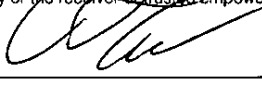


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90060 018 ****50.00

DOCUMENT # L02000024632 1. Entity Name ACH ACQUISITIONS, LLC					
Principal Place of Business 1499 W PALMETTO PARK RD STE 208 BOCA RATON, FL 33486			Mailing Address 1499 W PALMETTO PARK RD STE 208 BOCA RATON, FL 33486		
2. Principal Place of Business 1515 N. Federal Hwy. Suite, Apt. #, etc. Suite 300 City & State Boca Raton, FL Zip 33432 Country US		3. Mailing Address 1515 N. Federal Hwy. Suite, Apt. #, etc. Suite 300 City & State Boca Raton, FL Zip 33432 Country U.S.			
4. FEI Number 51-0470093		Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CASSAS, ANDREW N 1499 S PALMETTO PARK RD STE 208 BOCA RATON, FL 33486			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 1515 N. Federal Hwy. Suite 300 City Boca Raton State FL Zip Code 33432		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CASSAS, ANDREW N 1499 W PALMETTO PARK RD #208 BOCA RATON, FL 33486	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CASSAS, GAIL 1499 W PALMETTO PARK RD #208 BOCA RATON, FL 33486	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
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 608, Florida Statutes.			SIGNATURE: 		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date 4/27/06 Daytime Phone # 561/982-9933		

ATTACHMENT 20040519

LAW OFFICE OF
ANDREW N. CASSAS, P.A.

A Florida Professional Association
1515 N. Federal Hwy.
Suite 300
Boca Raton, FL 33432

Telephone: (561)982-9933
Facsimile: (561)864-1089

E-mail: cassaslaw@bellsouth.net
Web: www.southflorida
personal injury lawyer.com

April 27, 2006

Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, Florida 32314

RE: 2006 Annual Reports: Hellenic Property Holdings, LLC; A&S Acquisitions, LLC
ACH Acquisitions, LLC

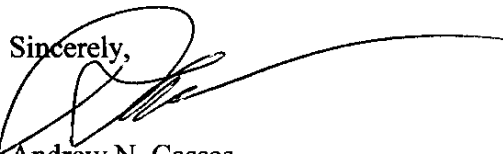
Dear Sir/Madam:

I have enclosed the original 2006 Annual Reports with changes relative to the above, along with 3 separate checks in the aggregate amount of One Hundred fifty Dollars and 00 Cents (\$150.00) to cover the filing fees.

If you have any questions concerning this matter, please contact me at the above number.

Thank you for your courtesy in this matter.

Sincerely,



Andrew N. Cassas
ANC:mfa
Enclosures