

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000025041

Entity Name: PCA GROUP, LLC

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

6161 BLUE LAGOON DR
SUITE 100
MIAMI, FL 33126

New Principal Place of Business:

4305 LAKE RD.
MIAMI, FL 33137

Current Mailing Address:

6161 BLUE LAGOON DR
SUITE 100
MIAMI, FL 33126

New Mailing Address:

4305 LAKE RD.
MIAMI, FL 33137

FEI Number: 54-2081175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KILISSANLY, PETER E
6161 BLUELAGOON DRIVE
STE 100
MIAMI, FL 33126 US

Name and Address of New Registered Agent:

KILISSANLY, PETER E
4305 LAKE RD.
MIAMI, FL 33137 US

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:

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KILISSANLY, PETER E
Address: 4305 LAKE RD
City-St-Zip: MIAMI, FL 33137

Title: MGR () Delete
Name: RODRIGUEZ, ALDO
Address: 1830 W. OAK KNOLL CIRCLE
City-St-Zip: FORT LAUDERDALE, FL 33324

Title: MGR (X) Delete
Name: MENEDEZ, JOSE
Address: 701 CORONADO AVE
City-St-Zip: MIAMI, FL 33143

Title: MGR (X) Delete
Name: SANTANA, ROBERT
Address: 15071 SW 154 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: MGR (X) Delete
Name: FONT, ODALYS
Address: 19541 SW 39TH CT
City-St-Zip: MIRAMAR, FL 33029

Title: MGR (X) Delete
Name: SPENCER, BEVERLY
Address: PO BOX 162739
City-St-Zip: MIAMI, FL 33116

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: SANTANA, ROBERT
Address: 15071 SW 154 TERRACE
City-St-Zip: MIAMI, FL 33187

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: PETER E. KILISSANLY

MGR

04/26/2006

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