

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000034607

Entity Name: PLATOM HOLDINGS, L.C.

**FILED**  
**Apr 04, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

3001 PONCE DE LEON BOULEVARD STE. 203  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

**Current Mailing Address:**

3001 PONCE DE LEON BOULEVARD STE. 203  
CORAL GABLES, FL 33134

**New Mailing Address:**

FEI Number: 52-1889140

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRODSKY & MULLIN, P.A.  
3059 GRAND AVENUE STE. 340  
MIAMI, FL 33133 US

**Name and Address of New Registered Agent:**

FERNANDEZ, ROSA  
3001 PONCE DE LEON BLVD.  
SUITE 203  
CORAL GABLES, FL 33134 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: ROSA FERNANDEZ

04/04/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PLANA, SARA  
Address: 785 CRANNIN BLVD., #1702  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PLANA, SARA  
Address: 785 CRANDON BLVD., #1702  
City-St-Zip: KEY BISCAYNE, FL 33149

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: SARA PLANA

MGRM

04/04/2006

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