2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 15, 2006 8:00 am
Secretary of State

04-27-2006 90017 034 ****50.00

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1. Entity Name
PANASEA MIAMI LLC

Principal Place of Business	Mailing Address
1925 BRICKELL AVENUE, STE. D-206 BRICKELL PALCE CONDOMINIUM MIAMI, FL 33129	1925 BRICKELL AVENUE, STE. D-206 BRICKELL PALCE CONDOMINIUM MIAMI, FL 33129

2. Principal Place of Business	3. Mailing Address
2100 W. 76 St	2100 W. 76 St
Suite, Apt. #, etc. #208	Suite, Apt. #, etc. #208
City & State Hialeah FL	City & State Hialeah FL
Zip 33016 Country USA	Zip 33016 Country USA

02082006 Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2855379 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MIAMI CORPORTE REGISTRY
1925 BRICKELL AVENUE, STE. D-206
MIAMI, FL 33129

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable) 2100 W. 76 St
#208
City Hialeah FL Zip Code 33016

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 ______________________________
Signature, typed or printed name of registered agent and title if applicable. (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	MGR MILLER, RICHARD 1400 CORAL WAY MIAMI, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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: R Miller R. MILLER 4/10/06 305-854-3851
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #