2007 LIMITED LIABILITY COMPANY

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ANNUAL REPORT	* 	Mar 16, 2007 08:00
DOCUMENT # L03000030265 1. Entity Name PROPERTY AMERICA GROUP LLC		Secretary of Stat
Principal Place of Business Mailing Address	-	
6745 SW 90 COURT 6745 SW 90 COUR MIAMI, FL 33173 US MIAMI, FL 33173		
en de la composition della com	,	
		03012007No Chg-LLC CR2E083 (11/05)
DO NOT WRITE IN THIS	SPACE	4. FEI Number Applied For 37-1473274 Not Applied For
		Certificate of Status Desired
6. Name and Address of Current Registered Agent		1 co sequines
BELLO, CATALINA 6745 SW 90 COURT MIAMI, FL 33173	· conditions in the conditions of the conditions	DO NOT WRITE IN THIS SPACE
the obligations of registered agent.	ig its registered office or i	registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature	re required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2007		
9. MAÑAGING MEMBERS/MANAGERS		
NAME BELLO-BETANCOURT, GUILLERMO		
STREET ADDRESS 6745 SW 90 COURT		
CITY-ST-3P MIAMI, FL 33173_		
TITLE V NAME GONZALEZ-MIJARES, OSCAR		HANNINEED OF
STREET ADDRESS 6745 SW 90 COURT		U0U0U0689135 N3/27/O7-80060-007_50.00
City-ST-ZIP MIAMI, FL 33173		was missed a parame of the action
tifice	<u>-</u> .	
NAME STREET ADDRESS	l	
CITY-ST-ZIP		DO NOT WRITE

IN THIS SPACE

11. I hereby certify that the information supplied with this filling 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.

TITLE

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE: X SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE