

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2006 8:00 am
Secretary of State

04-07-2006 90215 019 ****50.00

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1. Entity Name
PPCM USA INVESTMENTS, LLC.



Principal Place of Business

Mailing Address

965 SOUTH BAYSHORE BLVD
SAFETY HARBOR, FL 34695

965 SOUTH BAYSHORE BLVD
SAFETY HARBOR, FL 34695

2236 Cypress Hollow Court *2236 Cypress Hollow Court

DO NOT WRITE IN THIS SPACE



01172006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1073772

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

POLITIS, PETER
965 SOUTH BAYSHORE BLVD
SAFETY HARBOR, FL 34695

**DO NOT WRITE
IN THIS SPACE**

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**

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME POLITIS, PETER
STREET ADDRESS 965 SOUTH BAYSHORE BLVD *2236 Cypress Hollow Ct
CITY-ST-ZIP SAFETY HARBOR, FL 34695

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PLEASE Note New Address
Above. Thanks

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

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 TYPE OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Member

April 2nd 2006

Date

Daytime Phone #