

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 06, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000037820

1. Entity Name
PROPERTY ACQUISITION GROUP, LLC



Principal Place of Business
**9130 S DAELAND BLVD., SUITE 1101
MIAMI, FL 33156**

Mailing Address
**9130 S DAELAND BLVD., SUITE 1101
MIAMI, FL 33156**



07032006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1154810

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LAMCHICK, BRUCE
9130 S DAELAND BLVD., SUITE 1101
MIAMI, FL 33156**

**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 September 8, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BILCHIK, WARREN
9130 S DAELAND BLVD #1101
MIAMI, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
LAMCHICK, BRUCE
9130 S DAELAND BLVD #1101
MIAMI, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
IGLESIAS, LAZARO
9130 S DAELAND BLVD #1101
MIAMI, FL 33156**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000568133
07/06/06-80010-016 50.00

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

7/3/06
Date

305-670-4458
Daytime Phone #