

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040360

FILED
Jul 01, 2006
Secretary of State

Entity Name: PRIME MORTGAGE CAPITAL, LLC

Current Principal Place of Business:

7003 N. WATERWAY DRIVE, SUITE 209
MIAMI, FL 331552896

New Principal Place of Business:

1800 SW 98TH AVENUE
MIAMI, FL 331657651 US

Current Mailing Address:

7003 N. WATERWAY DRIVE, SUITE 209
MIAMI, FL 331552896

New Mailing Address:

1800 SW 98TH AVENUE
MIAMI, FL 331657651 US

FEI Number: 04-3793176 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FONTANILLS, LUIGI
7003 N. WATERWAY DRIVE, SUITE 209
MIAMI, FL 331552896 US

Name and Address of New Registered Agent:

FONTANILLS, LUIGI
1800 SW 98TH AVENUE
MIAMI, FL 331657651 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:

07/01/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FONTANILLS, LUIGI
Address: 7003 N. WATERWAY DRIVE, SUITE 209
City-St-Zip: MIAMI, FL 331552896

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FONTANILLS, LUIGI
Address: 1800 SW 98TH AVE,
City-St-Zip: MIAMI, FL 331657651

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: LUIGUI FONTANILLS

MGR

07/01/2006

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