## 2008 LIMITED LIABILITY COMPANY

## **FILED** ANNUAL REPORT Apr 28, 2008 08:00 AN Secretary of State **DOCUMENT # L04000063290** 1. Entity Name PPK HOLDINGS, L.L.C. Principal Place of Business Mailing Address 1300 NW 84 AVE 1300 NW 84 AVE MIAMI, FL 33126 MIAMI, FL 33126 01182008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1779637 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PEREZ, EDGARDO DO NOT WRITE 1300 NW 84 AVE MIAMI, FL 33126 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 reinstature) DATE U00000926707 FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 05/20/08-80076-023 138.75 9. MANAGING MEMBERS/MANAGERS MGRM TITLE PASCUAL, MARIO NAME STREET ADDRESS 1300 NW 84 AVE CITY-ST-ZIP MIAMI, FL 33126 TITLE MGRM PEREZ, EDGARDO NAME STREET ADDRESS 1300 NW 84 AVE CITY-ST-ZIP MIAMI, FL 33126 MGRM TITLE KILIDDJIAN, PETER M NAME STREET ADDRESS 1300 NW 84 AVE DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33126 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYP ED OR PRINTED N

HE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE