2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000063294

1. Entity Name
PPK CONSULTING, L.L.C.

Principal Place of Business	Mailing Address
1300 NW 84 AVE DORAL, FL 33126	1300 NW 84 AVE DORAL, FL 33126

DO NOT WRITE IN THIS SPACE

03142007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-1779752	Not Applicable

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

6. Name and Address of Current Registered Agent

PEREZ, EDGARDO
1300 NW 84 AVE
DORAL, FL 33126

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, 2007

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PASCUAL, MARIO
STREET ADDRESS	1300 NW 84 AVE
CITY-ST-ZIP	DORAL, FL 33126

TITLE	MGRM
NAME	PEREZ, EDGARDO
STREET ADDRESS	1300 NW 84 AVE
CITY-ST-ZIP	DORAL, FL 33126

TITLE	MGRM
NAME	KILIDDJIAN, PETER M
STREET ADDRESS	1300 NW84 AVE
CITY-ST-ZIP	DORAL, FL 33126

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U000000715059
04/27/07-80048-008 50.00

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: _____   04-16-07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #