2007 LIMITED LIABILITY COMPANY ... ANNUAL REPORT

DOCUMENT # L04000071375

1. Entity Name
PENN TERRACE LLC

Principal Place of Business

Mailing Address

182 MADEIRA AVENUE CORAL GABLES, FL 33134 U 182 MADEIRA AVENUE CORAL GABLES, FL 33134 US FILED Mar 02, 2007 08:00 AM Secretary of State



02222007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1705968 Applied For
Not Applicable

5. Certificate of Status Desired
Fee Regured

Applied For
Not Applicable

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

TRANSGLOBAL CORPORATE ADMINISTRATION, INC 520 BRICKELL KEY DRIVE, SUITE O-305 MIAMI, FL 33131

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	above named entity submits this statement for the purpose of chaobligations of registered agent.	anging its registered office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept
SIGNA			DATE
	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when roinstating)	DATE
	Filing Fee is \$50.00 Due by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TIDE	MGR		

SOICHER, FERNANDA NAME STREET ADDRESS 182 MADEIRA AVENUE CITY-ST-ZIP CORAL GABLES, FL 33134 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

000000654029 03/13/07-80046-002 50.00

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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 eath; 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

G MUNICER OR AUTHORIZED REPRESENTATIVE

2/23/07 3054439676

Daytime Phone #