

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039974

Entity Name: PPR INVESTMENTS, L.L.C.

FILED  
Mar 07, 2006  
Secretary of State

## Current Principal Place of Business:

2121 PONCE DE LEON BLVD.  
SUITE 240  
CORAL GABLES, FL 33134

## New Principal Place of Business:

## Current Mailing Address:

2121 PONCE DE LEON BLVD.  
SUITE 240  
CORAL GABLES, FL 33134

## New Mailing Address:

FEI Number: 83-0446796

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PRATS, GABRIEL  
2121 PONCE DE LEON BLVD.  
SUITE 240  
CORAL GABLES, FL 33134 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: FERNANDEZ, FRANCISCO J  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete  
Name: NOGUEIRA, VICENTE A  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete  
Name: NOGUEIRA, GUSTAVO A  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR (X) Delete  
Name: CAMPOS, MARIANO  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: NOGUEIRA, GABRIEL A  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change ( ) Addition  
Name: NOGUEIRA, VICENTE A  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM (X) Change ( ) Addition  
Name: NOGUEIRA, GUSTAVO A  
Address: 2121 PONCE DE LEON BLVD., SUITE 240  
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: VICENTE NOGUEIRA

MGRM

03/07/2006

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