

2006 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000057862

FILED
Nov 02, 2006
Secretary of State**Entity Name:** PREMIER INVESTMENT GROUP,LLC**Current Principal Place of Business:**2400 E COMMERCIAL BOULEVARD
708
FORT LAUDERDALE, FL 33308**New Principal Place of Business:****Current Mailing Address:**2400 E COMMERCIAL BOULEVARD
708
FORT LAUDERDALE, FL 33308**New Mailing Address:****FEI Number:** 86-1141630**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BALAN, GEORGE
4900 NORTH OCEAN BLVD
621
FORT LAUDERDALE, FL 33308 US**Name and Address of New Registered Agent:**SHCHERBAN, INNA
4900 NORTH OCEAN BLVD 1409
FORT LAUDERDALE, FL 33308 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: INNA

11/02/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:**Title:** MGR () Delete
Name: BALAN, GEORGE
Address: 4900 NORTH OCEAN BLVD APT. 621
City-St-Zip: FORT LAUDERDALE, FL 33308 US**Title:** MGR (X) Delete
Name: SHCHERBAN, INNA
Address: 4900 NORTH OCEAN BLVD APT. 1409
City-St-Zip: FORT LAUDERDALE, FL 33308 US**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: SHCHERBAN, INNA
Address: 4900 NORTH OCEAN BLVD 1409
City-St-Zip: FORT LAUDERDALE, FL 33308 US**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: INNA

MGR

11/02/2006

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