


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 29, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L05000067131</b> 1. Entity Name <b>PORSCHE'S HOLDINGS, LLC</b>	
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Principal Place of Business <b>4300 N. UNIVERSITY DR., SUITE D-106 LAUDERHILL, FL 33351</b>	Mailing Address <b>4300 N. UNIVERSITY DR., SUITE D-106 LAUDERHILL, FL 33351</b>
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**DO NOT WRITE IN THIS SPACE**



03262007 No Chg-LLC CR2E083 (11/05)

4. FEI Number <b>45-0514322</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GREENBERG, JOEL E  
4300 N. UNIVERSITY DR., SUITE D-106  
LAUDERHILL, FL 33351**

**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**

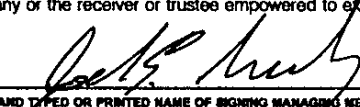
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM GREENBERG, JOEL E 4300 N. UNIVERSITY DR., SUITE D-106 LAUDERHILL, FL 33351</b>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM MICHAEL HYMOWITZ &amp; STACEY HYMOWITZ 19206 STONEBROOK ST. WESTON, FL 33332</b>
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04/05/07-80035-015 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 606, Florida Statutes.

**SIGNATURE:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**3/29/07 954-741-3800**  
Date Daytime Phone #