## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jul 17, 2006 8:00 am Secretary of State

DOCUMENT # L05000068704  1. Entity Name PRIME EQUITY HOLDINGS, LLC						07-05-2006 90104 048 ****50.00							
Principal Place of Business 9130 S. DADELAND BLVD., SUITE 1101 MIAMI, FL 33156  Mailing Address 9130 S. DADELAND BLVD. MIAMI, FL 33156				/D., SUI	TE 1101	98477991							
2. Principal Pl	lace of Busin	ness			3. Mailing Ad	Idress							
Suite, Apt. #, etc.				Suite, Apt. #, etc.			07122006	Chg-LLC	CR2E0	83 (11/05)			
City & State				City & State				4. FEI Numbe 43-20	87974		<u> </u>	plied For at Applicable	
Zíp	Country			Zip Country			5. Certificate	of Status Desired		\$5.00 Add Fee Require			
	6. Name	and Ad	idress of Cu	ırrent R	egistered Age	nt		Name	7. Name and	Address of New R	egistered /	Agent	
LAMCHIC									(D.O. Barrahamaha				
9130 S DA MIAMI, FL		BLVD	., SUITE 1	1101				Street Address	s (P.O. Box Numbe	er is Not Acceptable	•}		
								City	•		FL	Zip Cod	9
	named entitions of regis			nent for t	the purpose of	changing its r	registere	Led office or regist	tered agent, or bot	h, in the State of Flo		familiar with,	and accept
SIGNATURE.				ed agent an	id title if applicable.	(NOTE:	: Registere	d Agent signature requi	red when reinstating)		DATE		
		•											
	ling Fee i by Septer										e check p a Departm	ayable to lent of Stat	6
		nber 6	5, 2006	EMBER	S/MANAGERS	3	10.				a Departm	ent of Stat	9
Due b	irene	mber 6	ANAGING M memel memelic malebr	2 5 pec		S Delete	TITLE NAM STRE	l l		Florida	a Departm	ent of Stat	Addition
9. TITLE NAME STREET ADDRESS	irrang Eileen	mber 6	ANAGING M	2 5 pec	33126 # 'Pals	☐ Delete	TITLE NAM STRE CITY TITLE NAM STRE	E EET ADORESS - ST- ZIP		Florida	a Departm	ent of Stat	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	irrang Eileen	mber 6	ANAGING M memel memelic malebr	2 5 pec		Delete	TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE	E EET ADDRESS -ST-ZIP E E E -ST-ZIP E E E E E E E E E E E E E E E E E E E		Florida	a Departm	Change	☐ Addition
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

## ATTACHMENT

## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

7/5/2006-90104-048-\$50.00-\$50.00

		ANITOAL		-					
DOCUMENT(#L05000068704									
1. Entity Name PRIME EQUITY HOLDINGS, LLC									
Original Plans			B4-95- A 1A		- CE	┨	6110	27	
Principal Place 9130 S. DAD MIAMI, FL 33	ELAND BLV	s D., Suite 1101	Mailing Address 9130 S. DADELAND BLVD., SUITE 1101 MIAMI, FL 33156				001193		
2. Principal Pl	lace of Rusin	NOC 9	3. Mailing Address						MININ
2 rinopari	ace or Dusi	1033	J. Mesky Audress				IN OUTST SIND CERN COVE CENT		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			07032006	Chg-LLC	CR2E083 (11/05	)
City & State	9		City & State			4. FEI Numt	2087974	·	optied For lot Applicable
Zip		Country	Zip	Zip Country			e of Status Desired	S5.00 Ac	tditional
	6. Name	and Address of Current	Registered Agent	1	T	7. Name an	d Address of New R		
	ć 55(105				Name				
LAMCHICH 9130 S DA MIAMI, FL	DELAND	BLVD., SUITE 1101			Street Address	(P.O. Box Numb	per is Not Acceptable	)	·
Ť					City				
								FL Zip Cox	
5. The above the obligati	named entiti ions of regis	ly submits this statement fo tered agent.	r the purpose of changing its	register	ed office or registe	ered agent, or be	oth, in the State of Flo	rida. I am familiar with	, and accept
SIGNATURE .									
	Signature, typed	for printed rame of registered agent.	and title if applicable. (NOT	E Registers	d Agent egnesure require	iq aydu idingtipud)		DATE	
Fili Due b	ing Fee i by Septer	s \$50.00 nber 6, 2008	MA	NAbi	16 Memb	ej		check payable to Department of Sta	te
9.		MANAGING MEMBE	RSMANAGERS	10.		<del> \</del>	ADDITIONS/	CHANGES	
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CITY-ST-ZIP					-SI-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I turther 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 ceth; that I am a managing member or manager of the limited liability company or the paceiver or trustee emptywered to execute this report as required by Chapter 608, Florida Statutes.									
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