

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077983

FILED
Feb 17, 2006
Secretary of State

Entity Name: ALLIANZ PROPERTY MANAGEMENT LLC

Current Principal Place of Business:

1401 BRICKELL AVENUE
1010
MIAMI, FL 33131

New Principal Place of Business:

21 SW 15 ROAD
MIAMI, FL 33129

Current Mailing Address:

1401 BRICKELL AVENUE
1010
MIAMI, FL 33131

New Mailing Address:

21 SW 15 ROAD
MIAMI, FL 33129

FEI Number: 20-3199886

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUER, CHRISTIAN F
1401 BRICKELL AVENUE
1010
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

BAUER, CHRISTIAN F
701 BRICKELL KEY BLVD
MIAMI, FL 33131 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: CHRISTIAN

02/17/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BAUER, CHRISTIAN F
Address: 1401 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

Title: MGRM () Delete
Name: CERVERA BANKERS HOLD, INGS LLC
Address: 1401 BRICKELL AVENUE
City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BAUER, CHRISTIAN F
Address: 701 BRICKELL KEY BLVD
City-St-Zip: MIAMI, FL 33131

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: CHRISTIAN BAUER

MGRM

02/17/2006

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