2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000095575

1. Entity Name

PENTA BAY INVESTMENTS, LLC

FILED Apr 20, 2007 08:00 A Secretary of State

Principal Place of Business

C/O 782 NW 42ND AVE

STE 650 MIAMI, FL 33126 Mailing Address

C/O 782 NW 42ND AVE STE 650 Miami, FL 33126



04172007 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number		Applied For
	20-3623532		Not Applicable
5.	Certificate of Status Desired	\$5.00 Fee Red	Additional uired

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6. Name and Address of Current Registered Agent

ROBERT ALLEN LAW 1441 BRICKELL AVE STE 1400 MIAMI, FL 33131

MOD

DO NOT WRITE

	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 acce the obligations of registered agent.						
SIGNATUR							
	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						
0	MANAGING MEMBERS/MANAGERS	and the fifth of the control of	1011 No. 10 10 10 10 10 10 10 10 10 10 10 10 10				

	NAME STREET ADDRESS CITY-ST-ZIP	PATRONE, ALFREDO C/O 1441 BRICKELL AVENUE, STE 1400 MIAMI, FL 33131
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05/01/07-80029-021_50.00

DO NOT WRITE IN THIS SPACE

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 608, Florida Statutes.

SIGNATURE	Ξ:
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CITY-SY-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/12/07

Daytime Phone #