


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 11, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # L94000000540</b>	
1. Entity Name PEG HOLDINGS, L.C.	

Principal Place of Business 1428 BRICKELL AVE SUITE 400 MIAMI, FL 33131	Mailing Address 1428 BRICKELL AVE SUITE 400 MIAMI, FL 33131
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DO NOT WRITE IN THIS SPACE



04052007No Chg-LLC CR2E083 (11/05)

4. FEI Number 65-0542376	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CUMMINGS, PAUL M  
 1428 BRICKELL AVE SUITE 400  
 MIAMI, FL 33131

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00**  
**Due by May 1, 2007**

U00000700492  
 04/20/07-80016-024 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CUMMINGS, PAUL M 1428 BRICKELL AVE SUITE 400 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VOLSKY, GEORGE 1 SE THIRD AVENUE MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JACOBS, ERIC 13594 SW 58TH AVE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Paul Cummings Date: 4/5/07 Daytime Phone #: 305-311-7800

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