2005 LIMITED LIABILITY COMPANY

FILED **AM**

ANNUAL REPORT				Mar 10, 2005 08:00	
1. Entity Nam	MENT # L990000089 PES PRODUCTION, LLC	920		Secretary of Stat	
	e of Business NGTON STREET L 33040	Mailing Address 3423 PIEDMONT RD., N.E. -SUITE 318 ATLANTA, GA 30305			NA SINI BINI BINI BINI BINI BINI BINI
DO NOT WRITE IN THIS SPACE 5. Name and Address of Current Registered Agent			CE	, , , , , , , , , , , , , , , , , , , ,	Applied For Not Applicable \$5.00 Additional Fee Required
				DO NOT WRI	
the obligat	tions of registered agent.		ad office or register	red agent, or both, in the State of Florida. I	am familiar with, and accept
9,	MANAGING MEMBE	RS/MANAGERS			ALEXAN TOWNSON OF STREET
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEWIS, RICHARD T 1102 WASHINGTON STREET ATLANTA, GA 30305		U00000258751 03/10/05-80057-002 50.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEROSE, SUSAN E 1102 WASHINGTON STREET ATLANTA, GA 30305				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRI	
NAME STREET ADDRESS CITY-ST-ZIP				—IN THIS SPAC	CE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					The second secon
TITLE NAME STREET ADDRESS		- '			

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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.

Date

Daytime Phone #

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

SIGNATURE: _