2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

*FILED **DOCUMENT # M01000000004** SECRETARY OF STATE DIVISION OF CORPORATIONS 1. Entity Name PETROLEUM REALTY V. LLC 05 MAR -9 AM 10: 45 Principal Place of Business Mailing Address 1200 BRICKELL AVE., SUITE 1500 1200 BRICKELL AVE., SUITE 1500 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address 801 Arthur Gosfred Rd Suite, Apt. #, etc. Suite, Apt. #, etc. 01102005 Chg-LLC CR2E083 (10/03) City & State City & State 4. FEI Number Applied For Miani Beach FL 31-1643295 Not Applicable Country Zip Country Zip \$5.00 Additional 5. Certificate of Status Desired П 33140 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 City Zip Code 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, typed or printed name of registered agent and title if applicable. DATE Filing Fee Is \$50.00 Due by May 1, 2005 Make check payable to Florida Department of State ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. MGRM TITLE TITLE ☐ Change Addition PETROLEUM REALTY INVESTMENT PARTNERS, LP NAME NAME 1200 BRICKELL AVENUE, SUITE 1500 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete 900048498339 03/16/05--01008--001 **30 NAME NAME STREET ADDRESS STREET ADDRESS **300,00 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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

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3/7/05

305-779-8914

Daytime Phone #