


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2006 08:00 AM
Secretary of State

DOCUMENT # M02000001081 1. Entity Name PTG INDUSTRIES, LLC	
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Principal Place of Business 41 SKYLINE DRIVE SUITE 1009 LAKE MARY, FL 32746	Mailing Address 41 SKYLINE DRIVE SUITE 1009 LAKE MARY, FL 32746
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05012006No Chg-LLC CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3684654	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

**NIKITIN, DMITRI
41 SKYLINE DRIVE
SUITE 1009
LAKE MARY, FL 32746**

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reappointing)

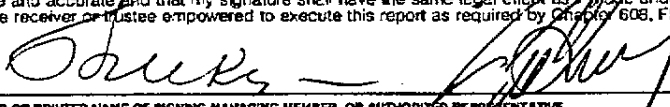
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM NIKITIN, DMITRI 41 SKYLINE DRIVE, SUITE 1001 LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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05/20/06-80025-009 50.00

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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 606, Florida Statutes.

SIGNATURE:  **04.30.06**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #