

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001741

FILED
Feb 06, 2006
Secretary of State

Entity Name: PLEASANT VALLEY INVESTMENTS, LC

Current Principal Place of Business:

3855 SOUTH JONES BLVD., SUITE 102
LAS VEGAS, NV 89103

New Principal Place of Business:

5888 WEST SUNSET ROAD
SUITE 200
LAS VEGAS, NV 89118

Current Mailing Address:

3855 SOUTH JONES BLVD., SUITE 102
LAS VEGAS, NV 89103

New Mailing Address:

5888 WEST SUNSET ROAD
SUITE 200
LAS VEGAS, NV 89118

FEI Number: 88-0367046

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
236 EAST 6TH AVENUE
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ARAVE, LEONARD K
Address: 39 EAST EAGLERIDGE DRIVE, SUITE 102
City-St-Zip: NORTH SALT LAKE, UT 84054

Title: MGR () Delete
Name: JONES, SCOTT
Address: 39 EAST EAGLERIDGE DRIVE, SUITE 102
City-St-Zip: NORTH SALT LAKE, UT 84054

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: LEONARD K. ARAVE

MGR

02/06/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date