2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 31, 2006
Secretary of State

DOCUMENT# M05000005829

Entity Name: AP GROUP LLC

Current Principal Place of Business:

311 LINCOLN ROAD STE 300
MIAMI BEACH, FL 33139

New Principal Place of Business:

4330 NE 2ND AVE
MIAMI, FL 33137

Current Mailing Address:

311 LINCOLN ROAD STE 300
MIAMI BEACH, FL 33139

New Mailing Address:

4330 NE 2ND AVE
MIAMI, FL 33137

FEI Number: 20-3565274 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

RODRIGUEZ, ALEX CPA
918 SOROLLA AVE.
CORAL GABLES, FL 33134 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: RODRIGUEZ, ALEXANDER
Address: 918 SOROLLA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR ( ) Delete
Name: HALIMI, PIERRE
Address: 311 LINCOLN ROAD STE 300
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition
Name: HALIMI, PIERRE
Address: 4330 NE 2ND AVE
City-St-Zip: MIAMI, FL 33137

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: ALEXANDER RODRIGUEZ MGR 08/31/2006

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