

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jun 16, 2008 8:00 am**  
**Secretary of State**

06-16-2008 90145 023 \*\*\*138.75

**DOCUMENT # L02000009622**

1. Entity Name  
RAYA PROPERTIES OF COLLIER COUNTY FLORIDA,  
L.L.C.



Principal Place of Business  
7117 PELICAN BAY BLVD., APT. 1508  
NAPLES, FL 34108

Mailing Address  
C/O BLUNDEN & ASSOCIATES  
14600 FRAMINGTON RD., SUITE 105  
LIVONIA, MI 48154

**50007104**

2. Principal Place of Business - No P.O. Box #  
300 5th Ave. S.

3. Mailing Address  
14600 Farmington Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 221

Suite 105

City & State  
Naples, FL

City & State  
Livonia, MI

05202008 Chg-LLC CR2E083 (12/06)

4. FEI Number  
04-3649863

Applied For  
Not Applicable

Zip  
34102

Country

Zip  
48154

Country  
Wayne

5. Certificate of Status Desired ☐ \$5.00 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

RAHIM, MAHMOUD MD  
7117 PELICAN BAY BLVD. APT. 1508  
SUITE 103  
NAPLES, FL 34108

## 7. Name and Address of New Registered Agent

Name  
RAHIM, MAHMOUD, M.D.

Street Address (P.O. Box Number is Not Acceptable)  
300 5th Ave. S. Suite 221

City  
Naples FL Zip Code 34102

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

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**Due by September 12, 2008**

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Make check payable to**  
**Florida Department of State**

## 9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
RAHIM, MAHMOUD  
4885 FAIRVIEW COURT  
WEST BLOOMFIELD, MI 48322 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
ABDULHUSSAIN, RAYA  
4885 FAIRVIEW COURT  
WEST BLOOMFIELD, MI 48322 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
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TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

## 10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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 608, Florida Statutes.

**SIGNATURE:**

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

Date

Daytime Phone #