2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000027833

1. Entity Name
RB & RDEB, LLC

Principal Place of Business	Mailing Address
405 ERIE AVENUE	405 ERIE AVENUE
TAMPA, FL 33606	TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

02292008 No Chg-LLC   CR2E083 (12/07)

4. FEI Number	Applied For
26-3474474	Not Applicable

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

6. Name and Address of Current Registered Agent

ADAMS, BRUCE H
405 ERIE AVENUE
TAMPA, FL 33606

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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
After May 1, 2008 Fee will be $538.75

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ADAMS, BRUCE H
STREET ADDRESS	405 ERIE AVENUE
CITY-ST-ZIP	TAMPA, FL 33606
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000864161
04/04/08-80002-015 138.75

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: _Bruce H. Adams Managing Member_   3/14/08   813-875-1040

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