

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # L95000000929

1. Entity Name

2R REAL ESTATE, L.C.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

05 OCT 31 AM 10:28

Principal Place of Business

2545 ROYAL PALM WAY  
FORT LAUDERDALE FL 33327

Mailing Address

2545 ROYAL PALM WAY  
FORT LAUDERDALE FL 33327



2. Principal Place of Business

3021 S.W. 116th Ave.

Suite, Apt. #, etc.

3. Mailing Address

3021 S.W. 116th Ave.

Suite, Apt. #, etc.

2nd MOORE

CR2E083 (5/05)

City & State

Davie, FL

City & State

Davie, FL

4. FEI Number

65-0628601

Applied For

Not Applicable

Zip

33330

Country

USA

Zip

33330

Country

USA

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ROBBIE, TIMOTHY J  
2545 ROYAL PALM WAY  
FT. LAUDERDALE FL 33327

7. Name and Address of New Registered Agent

Name

Robbie, Timothy J.

Street Address (P.O. Box Number is Not Acceptable)

3021 S.W. 116th Ave.

City

Davie

FL

Zip Code

33330

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

9/28/05

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By September 7, 2005**

9. MANAGING MEMBERS / MANAGERS

TITLE MGRM  
NAME ROBBIE, TIMOTHY J  
STREET ADDRESS 2545 ROYAL PALM WAY  
CITY-ST-ZIP FORT LAUDERDALE FL 33327

☐ Delete

TITLE MM  
NAME ROBBIE, ANNE  
STREET ADDRESS 2545 ROYAL PALM WAY  
CITY-ST-ZIP FORT LAUDERDALE FL 33327

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

10. ADDITIONS / CHANGES

TITLE MGRM  
NAME ROBBIE, TIMOTHY J.  
STREET ADDRESS 3021 S.W. 116th Ave.  
CITY-ST-ZIP Davie, FL 33330

☒ Change ☐ Addition

TITLE MM  
NAME ROBBIE, ANN  
STREET ADDRESS 3021 S.W. 116th Ave.  
CITY-ST-ZIP Davie, FL 33330

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Robbie, Timothy J.

9/28/05

**REINSTATEMENT 2005**