

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT (AR) - DUE BY MAY 1, 2008**

FILED

May 02, 2008 08:00 AM

Secretary of State

JAN 24 2009

DOCUMENT # L00000001148

1. Entity Name

RDB&J INVESTMENTS, LLC



Principal Place of Business

**560 LINCOLN RD.
STE 204
MIAMI BEACH FL 33139**

Mailing Address

**560 LINCOLN ROAD, SUITE 204
MIAMI BEACH FL 33137**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/07)

4. FEI Number

52-2250718

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DANIELS, NICHOLAS M ESQ.
C/O THERREL BAISDEN, P.A.
ONE S.E. 3RD AVE., STE. 2400
MIAMI FL 33131**

Name

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

City

FL

Zip Code

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 the filer (if filer is not the registered agent)

(NOTE: Registered agent must be listed and where it is not listed)

DATE

**FILE NOW!!! (FEE IS \$138.75)
After May 1, 2008, Fee Will Be \$538.75
Make Check Payable to Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☐ Change	☐ Addition
MGR	QUITTNER, ROBERT	560 LINCOLN ROAD, SUITE 204	MIAMI BEACH FL 33139	☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐
				☐					☐	☐

**000000346267 ☐ Change ☐ Addition
05/30/08-80040-018 138.75**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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

12/28/08 (309) 531-3535