## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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## DOCUMENT # L0000005895

Principal Place of Business

R.V.R. USA LLC

Malling Address

7782 NW 46TH STREET - #20 MIAMI, FL 33166 7782 NW 46TH STREET - #20 MIAMI, FL 33166

## FILED Apr 13, 2006 08:00 AM Secretary of State



04042008 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-1028811 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Regulted

6. Name and Address of Current Registered Agent

SARRAFF, CARLOS 7782 NW 48TH STREET - #20 MIAMI, FL 33166

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<ol> <li>The above named entity submits this statement for the purpose of char the obligations of registered agent.</li> </ol>	nging its registered office or registered agent, or both, in t	he State of Florida. I am familiar with, and accept
SIGNATURE  Signature, typed or printed name of registered agent and this it applicable.	thOTE: An pistered Agent algoritize required when reinstating	DATE
Filing Fee is \$50.00 Due by May 1, 2006		

9. MANAGING MEMBERS/MANAGERS MGRM TITLE SARRAFF, CARLOS NAME 7782 NW 46 ST, SUITE #20 STREET ADDRESS CAY-ST-ZIP MIAMI, FL 33166 TITLE NAME STREET ADDRESS CITY-ST-ZV NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME STREET ADDRESS Caty-St-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

00000050563 04/26/06-80127-005 50.00

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11. I hereby certify that the information supplied with this filling 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 dailt, 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 603, Florida Statutes.

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NAME STREET AUDRESS CITY-SY-ZIP

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

Savva

04/06/06 (305)

Daytime Phone #