2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT DOCUMENT # L00000014801 FILED 1. Entity Name 07 MAY -1 AM 8: 04 RORIRA, LLC TALI ATTASSFE, FLORIDA Principal Place of Business Mailing Address 10067 PINES BLVD 10061 PINES BLVD SUITE A SUITE A PEMBROKE PINES, FL 33024 PEMBROKE PINES, FL 33024 04202007 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAMIREZ & WATSON, P.A. DO NOT WRITE 10067 PINES BLVD. SUITE A PEMBROKE PINES, FL 33024 IN THIS SPACE 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 Filing Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 9. MGR TITLE PLATINUM 2000 REALTY, INC. NAME 10067 PINES BLVD. SUITE A STREET ADDRESS 000103132600 05/24/07--01009--025 ***950.00 CITY-ST-ZIP PEMBROKE PINES, FL 33024 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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 reserver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP