2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000003916

1. Entity Name

RAINMAKER TRADING COMPANY, LLC



Principal Place of Business

225 W. MIAMI AVE.

225 W. MIAMI AVE.

DO NOT WRITE IN THIS SPACE

Mailing Address

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VENICE, FL 34285 VENICE, FL 34285

FILED Mar 12, 2004 8:00 am Secretary of State

03-12-2004 90228 012 ****55.00



01242004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
65-1092149
Applied For
Not Applicable

5. Certificate of Status Desired
Fee Required
Fee Required

6. Name and Address of Current Registered Agent

JACOBSON, SUE A 46 N WASHINGTON BLVD #1

SARASOTA, FL 34236

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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)

Filing Fee is \$50.00 Due by May 1, 2004

9.	MANAGING MEMBERS/MANAGERS
mre	MGR
NAME	RICHARD, PETER
STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD, FL 34223
TITLE	
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11. I hereby o	certify that the information supplied with this filling does not qualify for the even
limited lia	certify that the information supplied with this filing does not qualify for the exert on this report is true and accurate and ther fall signature shall have the same bility company or the receiver or make employeered to expect this report as

DO NOT WRITE IN THIS SPACE

11. Thereby certify that the information supplied with this filing does not qualify for the elemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and thereby 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 this egyptowered to expedit this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

910

171-100 971

Daytime Phone #