J6 LIMITED LIABILITY COMPANY ANNUAL REPORT **FILED** JUMENT # L01000005630 Jan 31, 2006 08:00 AM RKE, L.L.C. **Secretary of State** Mailing Address of Business 1929 PORTAGE LANDING SE LANDING NORTH PALM BEACH, FL 33408 **BEACH, FL 33408** OZ. 01242006 No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1100599 Not Applicat \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MENDELSOHN, JOSHUA DO NOT WRITE 1929 PORTAGE LANDING NORTH PALM BEACH, FL 33408 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 primad name of registered agent and title if applicable DATE (NOTE Registered Agent signature required when reinstating) Filling Fee is \$50.00 Due by May 1, 2006 MANAGING MEMBERS/MANAGERS 8. MGR TITLE MENDELSOHN, JOSHUA STREET ADDRESS 1919 PORTAGE LANDING U00000412264 02/10/06-80038-018 **55.00** NORTH PALM BEACH, FL 33408 CHY-ST-ZP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP

OF BIONING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

 I hereby certify that the information indicated on this report is true and limited liability company or the per-

SIGNATURE AND T

with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information and that my signature shall have the same legal effect as if made under ceth; that I am a managing member or manager of the ustee empowered to execute this report as required by Chapter 608, Florida Statutes.