


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

04-12-2004 90027 019 ****55.00

DOCUMENT # L01000021453 1. Entity Name R.I. GOLDBERGER, L.L.C.	
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Principal Place of Business 5106 N ARMENIA SUITE 4 TAMPA, FL 33603	Mailing Address 5106 N ARMENIA SUITE 4 TAMPA, FL 33603
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DO NOT WRITE IN THIS SPACE

01212004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 69-2457754 01-0625318	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ANDERSON, WALLACE B JR 2202 N WEST SHORE BLVD SUITE 200 TAMPA, FL 33607
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**DO NOT WRITE
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, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR GOLDBERGER, RICHARD I M.D. 5106 N. ARMENIA AVENUE, SUITE 4 TAMPA, FL 33603
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Richard Goldberger **RICHARD GOLDBERGER** 4/16/04 (813)875-0074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #