

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000006289

FILED
Mar 20, 2009
Secretary of State

Entity Name: R2 INVESTMENTS, LLC.

Current Principal Place of Business:

2121 PONCE DE LEON BLVD.
800
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

2121 PONCE DE LEON BLVD.
800
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 46-0470224 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANTAELLA, HECTOR
2121 PONCE DE LEON BLVD.
800
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: URBINA-QUINTERO, RAFAEL JR.
Address: 2121 PONCE DE LEON BLVD., SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: TANCREDI, RODOLFO I
Address: 2121 PONCE DE LEON BLVD., SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: SANTAELLA, HECTOR
Address: 2121 PONCE DE LEON BLVD., SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR () Delete
Name: ROSENBERG, STEVEN
Address: 2121 PONCE DE LEON BLVD., SUITE 800
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: HECTOR SANTAELLA

MGR

03/20/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date