2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 25, 2005 08:00 AM

DOCU 1. Entity Nam RONO, L		355		Secretary of State
	e of Business ORANGE AVE. L 32801	Mailing Address 255 SOUTH ORANGE AVE. SUITE 1700 ORLANDO, FL 32801		
DO NOT WRITE IN THIS SPACE			02152005No Chg-LLC CR2E083 (10/03) 4. FEI Number	
6. Name and Address of Current Registered Agent				
255 SOUT SUITE 170	F, DWIGHT ESQ. TH ORANGE AVE. DO D, FL 32801			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				
Filing Fee is \$50.00 Due by May 1, 2005				
9.	MANAGING MEMBER	S/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AUFSEESSER, ERNST C/O 21, RUE DR MT BLANC GENEVA, SWITZERLAND,	2.342		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KURZ, PIERRE C/O 21, RUE DR MT BŁANC GENEVA, SWITZERLAND,			03/25/05-80012-002 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEBER, JEAN-PIERRE BELCHENSTR 19 BASLE SW,	24.0		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		A		
11. I hereby certify that the information supplied with this filling 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: SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Date Dayfine Phone 4				