2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2006
Secretary of State

DOCUMENT# L02000008334

Entity Name: RG MANAGEMENT LLC

Current Principal Place of Business:

9139 SW 150 AVE.
MIAMI, FL 331961353 OC

New Principal Place of Business:

Current Mailing Address:

9139 SW 150 AVE.
MIAMI, FL 331961353 OC

New Mailing Address:

FEI Number: 75-3072221 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GALLARDO, ROSA ALBA
9139 SW 150 AVE
MIAMI, FL 33196 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:	MGR	( ) Delete
Name:	GALLARDO, ROSA	
Address:	9139 SW 150 AVE.	
City-St-Zip:	MIAMI, FL 33196 OC	
Title:	MGR	( ) Delete
Name:	BUENO, RODRIGO	
Address:	9139 SW 150 AVE.	
City-St-Zip:	MIAMI, FL 33196 OC	
Title:	MGR	( ) Delete
Name:	ULLOA, ELVIA	
Address:	510 SW 11 AVE. APT. #3	
City-St-Zip:	MIAMI, FL 33130 OC	

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:	

I hereby certify that the information supplied with this filing does not qualify for the 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: ROSA ALBA GALLARDO MGR 05/12/2006

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