## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

SERVET WELL IN THIS SPACE

## DOCUMENT # L02000010470 1. Entity Name



FILED Jul 13, 2006 08:00 AM Secretary of State

Principal Place of Business 75 E. INDIANTOWN ROAD

RMG, LLC

SUITE 201 Jupiter, FL 33477 US Mailing Address

8287 QUAIL MEADOWS WAY WEST PALM BEACH, FL 33412 US

07102006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 54-2064795

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

SLATE, GARY S 8287 QUAIL MEADOWS WAY WEST PALM BEACH, FL 33401 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 aignature required when reinstating)

DATE

## Filing Fee is \$50.00 Due by September 6, 2006

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	SLATE, GARY S
STREET ADDRESS	8287 QUAIL MEADOWS WAY
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	MGRM
NAME	SLATE, CAROL
STREET ADDRESS	105 S. NARCISSUS AVE. SUITE 412
CITY-ST-ZIP	WEST PALM BEACH, FL 33401
TITLE	
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CITY-ST-ZIP	
11 I hereby certify that the information supplied with this filling does not qualify for the ex-	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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 eath; 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:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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