


**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 07, 2005 8:00 am**  
**Secretary of State**

04-07-2005 90091 006 \*\*\*\*50.00

<b>DOCUMENT # L02000011654</b> 1. Entity Name <b>R &amp; T INVESTMENTS, LLC</b>	
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Principal Place of Business <b>4529 N. PINE ISLAND ROAD SUNRISE, FL 33351 US</b>	Mailing Address <b>4529 N. PINE ISLAND ROAD SUNRISE, FL 33351 US</b>
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**DO NOT WRITE IN THIS SPACE**



04042005 No Chg-LLC CR2E083 (10/03)

4. FEI Number <b>43-1962820</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**MAYER, THOMAS  
4529 N. PINE ISLAND ROAD  
SUNRISE, FL 33351**

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM MAYERQ, THOMAS 4529 N PINE ISLAND RD FORT LAUDERDALE, FL 33351</b>
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**DO NOT WRITE IN THIS SPACE**

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 606, Florida Statutes.

SIGNATURE: *Thomas Mayer* *LM* *4/6/05*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #