

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)


FILED
Sep 27, 2004 8:00 am
Secretary of State

04-09-2004 90220 030 ****50.00

34010572



MOORE CR2E083 (11/03)

DOCUMENT # L02000012085					
1. Entity Name RAUSMAN MANAGEMENT, LLC					
Principal Place of Business 15 WEST 47TH STREET, SUITE 510 NEW YORK NY 10036			Mailing Address 15 WEST 47TH STREET, SUITE 510 NEW YORK NY 10036		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 06-1724923	
				Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
KAHN, IRIVING 2725 SOMLERSET DR FORT LAUDERDALE FL 33311				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 reissuing) DATE _____					
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004					
9. MANAGING MEMBERS/MANAGERS					
TITLE	MGR	<input type="checkbox"/> Delete	10. ADDITIONS/CHANGES		
NAME	RAUSMAN, MARTIN		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	280 GRAND VIEW AVENUE		NAME		
CITY- ST- ZIP	MONSEY NY 10952		STREET ADDRESS		
			CITY- ST- ZIP		
TITLE	MGR	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAUSMAN, HERBERT		NAME		
STREET ADDRESS	15 WEST 47TH STREET, SUITE 510		STREET ADDRESS		
CITY- ST- ZIP	NEW YORK NY 10036		CITY- ST- ZIP		
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 608, Florida Statutes.					
SIGNATURE: _____ Date: <u>4/1/04</u> Daytime Phone: _____					

Attachment 34010572

SOMERSET

PHASE IV

AND

PHASE V

2725 SOMERSET DRIVE

LAUDERDALE LAKES, FLORIDA 33311

(954) 485-8666

September 22, 2004

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
PO BOX 6478
TALLAHASSEE FL 32314

Subject: RAUSMAN MANAGEMENT, LLC
Ref. #: L02000012085

To whom it may concern:

Attached is the completed copy of our Annual Report / Uniform Business Report that you mailed to us requesting that we fill in our Federal EIN.

If there is anything further, please contact the registered agent as follows:

Irving Kahn
2725 Somerset Drive
Lauderdale Lakes FL 33311

Sincerely,



Hilde Johnson
Bookkeeper