

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 12, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000015781

1. Entity Name  
R&H EAST BAY, LLC



Principal Place of Business  
4840 RIDGEMOORE BOULEVARD  
PALM HARBOR, FL 34685

Mailing Address  
4840 RIDGEMOORE BOULEVARD  
PALM HARBOR, FL 34685



03062008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
61-1418052

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

SCHWANKE, TIM  
15312 CARROLTON LANE  
TAMPA, FL 33624

**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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

**9. MANAGING MEMBERS/MANAGERS**

TITLE D  
NAME CHARARA, REDWAN  
STREET ADDRESS 4840 RIDGEMOORE BLVD  
CITY- ST- ZIP PALM HARBOR, FL 34685

TITLE D  
NAME CHARARA, HASSAN  
STREET ADDRESS 4840 RIDGE MOORE BLVD  
CITY- ST- ZIP PALM HARBOR, FL 34685

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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CITY- ST- ZIP

U000000856292  
03/28/08-80007-008 138.75

**DO NOT WRITE  
IN THIS SPACE**

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

3-10-08

Date

Daytime Phone #

727 785-0044