2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000016111

1. Entity Name
BARUCH INVESTMENTS LLC

Principal Place of Business	Mailing Address
9450 N.W. 125TH SREET REDDICK, FL 32686	P.O. BOX 953 FAIRFIELD, FL 32634

DO NOT WRITE IN THIS SPACE

01112004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number 75-3067233	Applied For Not Applicable
5. Certificate of Status Desired ☐	$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PICKETT, ROSE
9450 N.W. 125TH SREET
REDDICK, FL 32686

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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

Filing Fee is $50.00
Due by May 1, 2004

U00000094574
03/23/04--80002-002 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	PICKETT, JOHN
STREET ADDRESS	9450 NW 125TH ST
CITY-ST-ZIP	REDDICK, FL 32686
TITLE	MGRM
NAME	PICKETT, ROSE
STREET ADDRESS	9450 NW 125TH ST
CITY-ST-ZIP	REDDICK, FL 32686
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: _Rose Pickett_   Rose Pickett   3-18-04   352-591-4924

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #