2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 29, 2005 08:00 AM **Secretary of State** DOCUMENT # L02000017107 1. Entity Name R & A TRADING L.L.C. Principal Place of Business ___ Mailing Address 674 GLENRIDGE ROAD **674 GLENRIDGE ROAD** KEY BISCAYNE, FL 33149 US KEY BISCAYNE, FL 33149 US 03112005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 54-2064348 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RUBIO, EMILIO J DO NOT WRITE 674 GLENRIDGE ROAD KEY BISCAYNE, FL 33149 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, typed or printed name of registered agent and little II applicable (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE RUBIO, EMILIO J STREET ADDRESS 674 GLENRIDGE ROAD CITY-ST-ZIP KEY BISCAYNE, FL 33149 TITLE MGR NAME RUBIO, INES A STREET ADDRESS 674 GLENRIDGE ROAD CITY-ST-ZIP KEY BISCAYNE, FL 33149 NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied the property of the exemption stated in Section 119 07(3)(i). Fiorida Statutes I further certify that the information indicated on this report is true and accurate and managing member or manager of the limited liability company of the receiver or truestyle impowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

305-648.8108

FILED

Daytime Phone #