

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 06, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000025825

1. Entity Name
RAE ENTERPRISES, LLC



Principal Place of Business
5071 SAVARESE CIRCLE
TAMPA, FL 33634

Mailing Address
P.O. BOX 261203
TAMPA, FL 33685

DO NOT WRITE IN THIS SPACE



04012005No Chg-LLC

CR2E083 (10/03)

4. FEI Number
22-3874992

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

EGGNATZ, RICHARD
3071 SAVARES CIR
TAMPA, FL 33626

**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 re-registering)

DATE

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

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP
MGRM
EGGNATZ, RICHARD
5071 SAVARESE CIR
TAMPA, FL 33634

TITLE
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04/06/05-80022-015 50.00

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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 608, Florida Statutes.

SIGNATURE:

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

Date

Original Filing #

3/1/05 (802) 886-4078