

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 30, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000033385**

1. Entity Name  
**RAYMA REAL ESTATE, LLC**



Principal Place of Business  
**14720 MLKING JR BLVD  
DOVER, FL 33527**

Mailing Address  
**14720 MLKING JR BLVD  
DOVER, FL 33527**



03262006 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**56-2306709**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

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

**MARTINEZ, JOSE A  
1209 E WHEELER RD  
SEFFNER, FL 33584**

**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

**Filing Fee is \$50.00  
Due by May 1, 2006**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	P
NAME	MARTINEZ, JOSE A
STREET ADDRESS	1209 E WHEELER RD
CITY-ST-ZIP	SEFFNER, FL 33584
TITLE	VP
NAME	ROMOS, SERGIO
STREET ADDRESS	6956 SHEPARD OAKS
CITY-ST-ZIP	LAKELAND, FL 33811
TITLE	S
NAME	RAMOS, PORFIRIO
STREET ADDRESS	912 LOGANOERRY LN #204
CITY-ST-ZIP	PLANT CITY, FL 33563
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

000000485460  
04/12/06-80084-007 50.00

**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 a 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

Daytime Phone #

3-27-06