2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000023343

1. Entity Name

RUBIN FAMILY INVESTMENTS LLC



FILED Apr 27, 2006 08:00 AN Secretary of State

Principal Place of Business

15500 ROOSEVELT BLVD., SUITE 303 CLEARWATER, FL 33760 Mailing Address

15500 ROOSEVELT BLVD., SUITE 303 CLEARWATER, FL 33760



01232006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0059911 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RUBIN, LESLIE A 15500 ROOSEVELT BLVD., SUITE 303 CLEARWATER, FL 33760

DO NOT WRITE IN THIS SPACE

		IIN	IN I HIS SPACE	
8. The above the obligat	e named entity submits this statement for the purpose of char- tions of registered agent.	nging its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE, Registered Agent signature required when reinstating)	DATE	
F	iling Fee is \$50.00 Due by May 1, 2006			
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM RUBIN, LESLIE A 15500 ROOSEVELT BLVD #303 CLEARWATER, FL 33760			
NAME STREET ADDRESS CITY-ST-ZIP			U00000537894 05/09/06-80036-024 50.00	
TITLE NAME STREET ADDRESS CHTY-ST-ZIP		DO	NOT WRITE	
ITLE NAME STREET ADDRESS CITY-ST-ZIP		IN	THIS SPACE	
OTLE NAME STREET ADDRESS CITY-ST-ZIP				
INTLE NAME			. - ···	

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:

STREET ADDRESS CITY-ST-ZIP

JRE: LESCIE A RUBIN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/20/06

727 530 002/