## 2097 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**DOCUMENT # L03000025829** 

Entity Name
 RYEBROOK EQUITIES, LLC



FILED Jan 18, 2007 08:00 AM Secretary of State

Principal Place of Business

16250 NW 52ND AVE MIAMI, FL 33014 Mailing Address

16250 NW 52ND AVE MIAMI, FL 33014



01152007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number Applied For Not Applicable
5. Certificate of Status Desired S5.00 Additional Fee Required

Name and Address of Current Registered Agent

RUTTER, DAVID 16250 NW 52ND AVE MIAMI, FL 33014

## DO NOT WRITE IN THIS SPACE

<ol><li>The above named entity submits this statement for the purpose of cha the obligations of registered agent.</li></ol>	nging Its registered office or registered agent, or bo	oth, in the State of Fiorida. I am familiar with, and accept
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, 2007		000000592120 01/19/07-80049-019 55.00

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RUTTER, DAVID 16250 NW 52ND AVE MIAMI, FL 33014
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TIFLE NAME STREET ADDRESS CIFY-ST-ZIP	
TITLE	

## 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 the limited (lability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Y ---

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-SY-ZIP

STREET ADDRESS CITY-ST-ZIP

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

MOR OILIGO

788-370

Daytims Phone #