2007 LIMITED LIABILITY COMPANÝ ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000026840

1. Entity Name

RONIN REAL ESTATE INVESTMENT GROUP LLC



Principal Place of Business

4230 N.W. 12TH STREET COCONUT CREEK, FL 33066 Mailing Address

4230 N.W. 12TH STREET COCONUT CREEK, FL 33066

FILED Apr 30, 2007 08:00 AN Secretary of State



04242007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone #

4.	FE! Number	 	Applied For
	NOT APPLICABLE	 	Not Applicable
5.	Certificate of Status Desired	\$5.0	0 Additional

6. Name and Address of Current Registered Agent

DIPILATO, VICTOR JR. 4230 N.W. 12TH STREET COCONUT CREEK, FL 33086

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

IN THIS SPACE	DO	NOT	WR	ITE
	IN	THIS	SPA	CE

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, 2007					
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				
NAME STREET AODRESS	ELBUALY, CHRISTINE 4230 N.W. 12TH STREET				
CITY-ST-ZIP	COCONUT CREEK, FL 33066	U0000745518			
TITLE		05/16/07-80035+023 50.00			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE					
NAME STREET ADDRESS					
CITY-ST-ZIP		DO NOT WRITE			
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CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY-ST-ZIP	A Comment				
11. I hereby certify that the information supplied with tris 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 expowered to execute this report as required by Chapter 608, Florida Statutes.					

ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE