## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## **DOCUMENT # L03000038817**

RB XXXV, LLC



Principal Place of Business

9240 SW 72ND ST., STE. 118 MIAMI, FL 33173

Mailing Address

9240 SW 72ND ST., STE. 118 MIAMI, FL 33173

## **FILED** Jan 11, 2005 8:00 am Secretary of State

01-11-2005 90021 039 \*\*\*\*50.00

20001311



01052005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 20-0295904

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

	o. Name and Address of Current Aegistered Agent	
	ROLANDO 72ND ST., STE. 100 33173	DO NOT WRITE IN THIS SPACE
	named entity submits this statement for the purpose of char tions of registered agent.	nging its registered office or registered agent, or both, 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
9. TITLE NAME STREET ADDRESS	MANAGING MEMBERS/MANAGERS  MGRM BENITEZ, ROLANDO 9240 SW 72ND ST., STE. 100	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MIAMI, FL 33173	
NAME STREET ADDRESS City-St-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS		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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

> SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING AGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #