

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000045706

1. Entity Name
RLR TWO, LLC



Principal Place of Business
17855 SW 248TH STREET
HOMESTEAD, FL 33031

Mailing Address
17855 SW 248TH STREET
HOMESTEAD, FL 33031

FILED
DIVISION OF STATE
06 APR 19 PM 1:58

DO NOT WRITE IN THIS SPACE

01092006 No Chg-LLC CR2E083 (11/05)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

RUTZKE, TINA M
17855 SW 248TH STREET
HOMESTEAD, FL 33031

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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 MGRM
NAME RUTZKE, BARNEY W JR.
STREET ADDRESS 15600 SW 288TH STREET, #201
CITY-ST-ZIP HOMESTEAD, FL 33033

TITLE MGRM
NAME RUTZKE, TINA M
STREET ADDRESS 15600 SW 288TH STREET, #201
CITY-ST-ZIP HOMESTEAD, FL 33033

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2000074328162
05/10/06--01012--006 **250.00

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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:

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

4-11-06-305245-4595

Date

Daytime Phone #