## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED May 02, 2005 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State	
1. Entity Nam		48099		Secretar	y of State
ROBERT'	'S FURNITURE, LLC				
Principal Place	e of Business	Mailing Address	<u> </u>		
1648 NW 87 AVE. 1648 NW 87 AVE.					
MIAMI, FL 3:	31/2	MIAMI, FL 33172			
				04222005No Chg-LLC	CR2E083 (10/03)
Ď	O NOT WRI	TE IN THIS SF	ACE	4. FEI Number	Applied For
				56-2419937	Not Applicable
					\$5.00 Additional Fee Required
<u> </u>	6. Name and Address of Cu	rrent Registered Agent	mes squandatul	y de la company de la comp La company de la company d	a iklaskaanin saan asta saan a
MONTEJO, ROBERTO			Tale and Alberta	DO NOT WR	ITE
1648 NW 87TH AVE. MIAMI, FL 33172				a same and all and a second	
1,11,1,1,1,1,1				IN THIS SPA	CE
	named entity submits this statem tions of registered agent.	ent for the purpose of changing its re-	gistered office of register	red agent, or both, in the State of Florida	. I am familiar with, and accept
SIGNATURE.			<del>-:</del>		
0,0147-01.23	Signature, typed or printed name of registere	segent and title if applicable. (NOTE: R	egistered Agent signature required	t when reinstating)	DATE
D F	iling Fee is \$50.00 ue by May 1, 2005				
9.	MANAGING M	EMBERS/MANAGERS			<del>ander og gryser i karalan milde</del> .
THLE	MGR				*
NAME STREET ADDRESS	MONTEJO, ROBERTO 1648 NW 87TH AVE.				
CITY-ST-ZIP	MIAMI, FL 33172			L000003	19582
TITLE	MGR	- t		**************************************	1159-016 50.00
NAME STREET ADDRESS	MONTEJO, OLGA 1648 NW 87 AVE.	**			
CITY-ST-ZIP	MIAMI, FL 33172		<b>]</b>		
TOTLE				etyre a filologic etherus <del>and the tredering</del> typisal at situatur an an an an a Ta	* ***** *******************************
NAME STREET ADDRESS	<u> </u>				
CITY-ST-ZIP				DO NOT WE	III E
TITLE				IN THIS SPA	CE
NAME STREET ADDRESS			·		
CITY-ST-ZIP			[		
TOTLE			1,	tid divinediffic di miseri i morte, girini. Tanco	
NAME STREET ADDRESS					ere e j
CITY-ST-ZIP		_			•
TITLE			A SC SP. LONG TO SERVICE	in a spilotopia (1917), golo anto La resigna (mendia del pilotopia en est	a taka bara sa kara sa katang katang katang sa Karang sa karang sa
NAME STREET ADDRESS					

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath, that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Plorida Statutes.

SIGNATURE:

CITY-ST-ZIP

URE: Olya Mortey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGENEME

MEMBER, OR AUTHORIZED REPRESENTATIVE

4-28-05

305-392-630¢

Daytime Phone #