2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2008
Secretary of State

DOCUMENT# L03000053115

Entity Name: R² CONSTRUCTION GROUP, LLC.

Current Principal Place of Business:

6326 SW 11TH STREET
MIAMI, FL 33144

New Principal Place of Business:

6469 SW 8TH STREET
MIAMI, FL 33144

Current Mailing Address:

6326 SW 11TH STREET
MIAMI, FL 33144

New Mailing Address:

6469 SW 8TH STREET
MIAMI, FL 33144

FEI Number: 20-0639949 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REYES, RICHARD M
6326 SW 11TH STREET
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD
STE A
DELTONA, FL 32725 US

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.

SIGNATURE: SHANNON DUNN FOR ALL FLORIDA FIRM INC 04/09/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: REYES, RICHARD M
Address: 6326 SW 11 STREET
City-St-Zip: MIAMI, FL 33144

Title: MGRM (X) Delete
Name: REYES, GIANNA D
Address: 6326 SW 11 STREET
City-St-Zip: WEST MIAMI, FL 33144

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: REYES, RICHARD M
Address: 6469 SW 8TH STREET
City-St-Zip: MIAMI, FL 33144

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: SHANNON DUNN FOR RICHARD REYES RA 04/09/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date