


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Jan 30, 2006 8:00 am**  
**Secretary of State**

01-30-2006 90157 048 \*\*\*\*50.00

<b>DOCUMENT # L04000019473</b>	
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1. Entity Name  
RICMAC INVESTMENTS, LLC

Principal Place of Business  
C/O WHITE & BROWN PA  
9000 SW 152ND ST. STE 102  
MIAMI, FL 33157

Mailing Address  
C/O WHITE & BROWN PA  
9000 SW 152ND ST. STE 102  
MIAMI, FL 33157

2. Principal Place of Business  
7450 SW 131 Street

3. Mailing Address  
PO Box 560945

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01032006 Chg-LLC CR2E083 (11/05)

City & State  
Miami, Florida

City & State  
Miami, Florida

4. FEI Number  
90-0157620

Applied For  
Not Applicable

Zip  
33156

Country  
USA

Zip  
33256-0945

Country  
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

BROWN, B. MACKAY ESQ  
C/O WHITE & BROWN PA  
9000 SW 152ND ST. STE 102  
MIAMI, FL 33157

**7. Name and Address of New Registered Agent**

Name  
B. Mackay Brown (same)

Street Address (P.O. Box Number is Not Acceptable)  
7450 SW 131 Street

Miami

City  
Miami FL Zip Code  
33156

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**

**Make check payable to  
Florida Department of State**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
GOULBOURNE, RICHARD  
8264 SW 176TH TERR.  
MIAMI, FL 33157 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
BROWN, B. MACKAY  
9000 SW 152ND ST. STE 102  
MIAMI, FL 33157 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

**10. ADDITIONS/CHANGES**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
7450 SW 131 Street  
Miami, Florida 33156 ☒ Change ☐ Addition

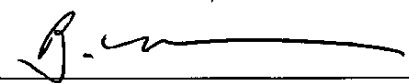
TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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:**  B. MACKAY Brown 1/27/06 305-259-8200

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

Date

Daytime Phone #