

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000036559

Entity Name: I.R.-B.B. LLC

**FILED**  
**Jan 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4554 SE 5TH PLACE  
#213 (A/K/A #404)  
CAPE CORAL, FL 33910 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 100790  
CAPE CORAL, FL 33910 US

**New Mailing Address:**

375 SOUTH END AVE. 34-G  
NEW YORK, NY 10280 US

FEI Number: 26-0093077

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BERMAN, BEN  
4554 SE 5TH PLACE  
#213 (A/K/A #404)  
CAPE CORAL, FL 33910 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROGOWSKI, IZHAK  
Address: 4822 AGUALINDA BLVD.  
City-St-Zip: CAPE CORAL, FL 33914 US

Title: MGRM  
Name: BERMAN, BEN  
Address: P.O. BOX 100790  
City-St-Zip: CAPE CORAL, FL 33910 US

I hereby 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: BEN BERMAN

PRES

01/30/2010

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date