2006 LIMITED LIABILITY COMPANY ANNUAL REPORT F

FILED Feb 01, 2006 08:00 AN Secretary of State

DOCUMENT # L040 1. Enuity Name RESIDENTIAL INVESTMENT		
Principal Place of Business	Mailing Address	

13951 SW 136 PL

MIAMI, FL 33186



 \Box

DO NOT WRITE IN THIS SPACE

01102006 No Chg-LLC CR2E083 (11/05)

> Applied For Not Applicable

5. Certificate of Status Desired

20-1429601

4. FEI Number

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BASTORI, ROBERTO 13951 SW 136 PL MIAMI, FL 33186 .

13951 SW 136 PL

MIAMI, FL 33186

DO NOT WRITE IN THIS SPACE

8. The above nam	ed entity submits this statement for the purpose of char	nging its registered office or registered agent, or both, i	n the State of Florida. I am familiar with, and accept
the obligations	of registered agent		
SIGNATURE	Politica -	,	
Signs	ture, 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

U000000413789 02/11/06-80010-011 50.00

9. MANAGING MEMBERS/MANAGERS	
ITTE MGR NAME BASTORI, ROBERTO STREET ADDRESS 13951 SW 136 PL CITY-ST-ZIP MIAMI, FL 33186	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	IN THIS SPACE
DITE NAME SIREET ADDRESS GITY-ST-ZIP	
INTLE NAME STREET ADDRESS CITY-ST-7IP 11. I hereby certify that the information supplied with this filing does not qualify for the exe	motions contained in Chanter 110 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