## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000056975

Entity Name: REVENUE ASSURANCE GROUP, LLC

FILED Aug 22, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

2960 WEST LAKE VISTA CIRCLE 1525 NW 167TH STREET, SUITE 200

MIAMI, FL 33169 DAVIE, FL 33328

**Current Mailing Address: New Mailing Address:** 

1525 NW 167TH STREET, SUITE 200 2960 WEST LAKE VISTA CIRCLE

MIAMI, FL 33169 DAVIE, FL 33328

FFI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

BUECHELE, MARK BUECHELE, MARK E 1525 NW 167TH STREET, SUITE 200 1250 ALTON ROAD

MIAMI, FL 33169 MIAMI BEACH, FL 33139 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.

ADDITIONS/CHANGES:

SIGNATURE: MARK E BUECHELE 08/22/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete (X) Change ( ) Addition

MILLSTONE, JOSEPH MILLSTONE, JOSEPH Name: Name: 1525 NW 167TH STREET, SUITE 200 Address: 2960 WEST LAKE VISTA CIRCLE Address:

MIAMI, FL 33169 DAVIE, FL 33328

City-St-Zip: City-St-Zip:

Title: MGR Title: MGR (X) Change ( ) Addition ( ) Delete Name: LEIRO, ANGEL Name: LEIRO, ANGEL

Address: 1525 NW 167TH STREET, SUITE 200 Address: 2960 WEST LAKE VISTA CIRCLE

City-St-Zip: MIAMI, FL 33169 City-St-Zip: **DAVIE, FL 33328** 

Title: MGR () Delete Title: MGR (X) Change ( ) Addition

BUECHELE, MARK Name: BUECHELE, MARK Name: 1525 NW 167TH STREET, SUITE 200 Address: Address: PO BOX 398555 City-St-Zip: MIAMI, FL 33169 City-St-Zip: MIAMI BEACH, FL 33239

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK E BUECHELE 08/22/2005