

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058717

FILED  
Feb 18, 2005  
Secretary of State

**Entity Name:** THE REAL INVESTMENTS GROUP, L.L.C.

**Current Principal Place of Business:**

14228 SW 62 STREET  
MIAMI, FL 33183

**New Principal Place of Business:**

**Current Mailing Address:**

14228 SW 62 STREET  
MIAMI, FL 33183

**New Mailing Address:**

**FEI Number:** 20-2347250

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

QUINTERO, ANGEL  
14228 SW 62 STREET  
MIAMI, FL 33183 US

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

QUINTERO, ANGEL MGR  
14228 SW 62 STREET  
MIAMI, FL 33183 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: ANGEL QUINTERO

02/18/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: QUINTERO, ANGEL  
Address: 14228 SW 62 STREET  
City-St-Zip: MIAMI, FL 33183

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: QUINTERO, ANGEL MGR  
Address: 14228 SW 62 STREET  
City-St-Zip: MIAMI, FL 33183

Title: MGRM ( ) Change (X) Addition  
Name: LORENZO, ROLANDO MGRM  
Address: 6884 WEST FLAGLER STREET  
City-St-Zip: MIAMI, FL 33144

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: ANGEL QUINTERO

MGR

02/18/2005

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