2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000060746

1. Entity Name

RSC OAKLEAF GREENVILLE, LLC



Principal Place of Business

1660 N.E. MIAMI GARDENS DRIVE SUITE ONE

NORTH MIAMI BEACH, FL 33179

Mailing Address

1660 N.E. MIAMI GARDENS DRIVE SUITE ONE

NORTH MIAMI BEACH, FL 33179

FILED Mar 19, 2007 8:00 am Secretary of State

03-19-2007 90464 038 ****50.00

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01172007 No Chg-LLC

CR2E083 (11/05)

6. Name and Address of Current Registered Agent

ROYAL SENIOR CARE, LLC 1660 NE MIAMI GARDENS DR STE. 1 MIAMI, FL 33179 DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of cha tions of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
F D	iling Fee is \$50.00 ue by May 1, 2007		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR A		
NAME	BITTAN, AVI		
STREET ADDRESS	1660 N.E. MIAMI GARDENS DRIVE		
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179		
TITLE	MGR PROPERTY OF THE PROPERTY O		
NAME	SOFFER, AHARON		
STREET ADDRESS	1660 N.E. MIAMI GARDENS DRIVE		
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179		
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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:

CITY-ST-ZIP

STREET ADDRESS

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

3.13.200

Daytime Phone #