
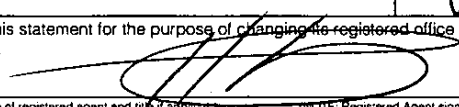
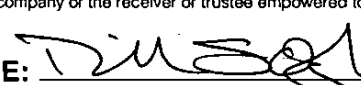


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2005 8:00 am
Secretary of State

01-19-2005 90025 019 ****50.00

DOCUMENT # L04000066851					
1. Entity Name RSOSRO LLC					
Principal Place of Business C/O MARTIN D. HAUPTMAN, ESQ. 100 EXECUTIVE DRIVE, SUITE 330 WEST ORANGE, NJ 07052 US			Mailing Address C/O MARTIN D. HAUPTMAN, ESQ. 100 EXECUTIVE DRIVE, SUITE 330 WEST ORANGE, NJ 07052 US		
2. Principal Place of Business 3301 CHEETHAM HILL BLVD		3. Mailing Address 3301 CHEETHAM HILL BLVD			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State LOXAHATCHEE, FL		City & State LOXAHATCHEE, FL		4. FEI Number 20-1614533	
Zip 33470		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32304			7. Name and Address of New Registered Agent Name MARTIN V. KATZ Street Address (P.O. Box Number is Not Acceptable) 625 North Flamingo Dr. 9th FL. City West Palm Beach FL Zip Code 33401		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE:  DATE: 1/17/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 2005			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OGLENSKI, RICHARD S 17 FOREST RIDGE TERRACE OAK RIDGE, NJ 07438 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OGLENSKI, RICHARD S 3301 CHEETHAM HILL BLVD LOXAHATCHEE, FL 33470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OGLENSKI, SHOLA R 17 FOREST RIDGE TERRACE OAK RIDGE, NJ 07438 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM OGLENSKI, SHOLA R 3301 CHEETHAM HILL BLVD LOXAHATCHEE, FL 33470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify 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 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:  RICHARD S. OGLENSKI Date: 01/14/05 Daytime Phone #: 561-234-0223 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					

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01072005 Chg-LLC CR2E083 (10/03)