

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L04000071327

1. Entity Name
R&B TRUCKING, LLC



Principal Place of Business
8875 RAMBLE WOOD DR., #2014
CORAL SPRINGS, FL 33071

Mailing Address
8875 RAMBLE WOOD DR., #2014
CORAL SPRINGS, FL 33071

FILED

06 APR -6 AM 10:39

STATE
TALLAHASSEE, FLORIDA



01222006No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1701244

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GAY, JOHN L JR
JFG FINANCIAL SERVICES, LLC
2351 NW 196TH STREET
MIAMI, FL 33056

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, 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**

10000401265
02/06/06 80840-614 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	P
NAME	INGLETON, KAREEM
STREET ADDRESS	8875 RAMBLE WOOD DR. SUITE#2014
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	V
NAME	INGLETON, NICOLE
STREET ADDRESS	8875 RAMBLE WOOD DR. SUITE# 2014
CITY-ST-ZIP	CORAL SPRINGS, FL 33071
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100070795681
04/18/06--01032--022 **50.00

**DO NOT WRITE
IN THIS SPACE**

4/6/06

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: _____

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

1/22/06 954-346-1460
Date Daytime Phone #