

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092641

Entity Name: RN INVESTORS, LLC

FILED
Apr 28, 2007
Secretary of State

Current Principal Place of Business:

21239 NE 31ST AVENUE
AVENTURA, FL 33180

New Principal Place of Business:

Current Mailing Address:

21239 NE 31ST AVE
AVENTURA, FL 33180

New Mailing Address:

FEI Number: 20-2059970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ATER REGISTERED AGENTS, LLC
2601 SOUTH BAYSHORE DRIVE, STE. 600
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

MESA AND MESA ACCOUNTING, INC
2441 NW 93 AVE.
SUITE 101
MIAMI, FL 33172 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: INES PORTALES

04/28/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: RODRIGUEZ, GERARDO
Address: 21239 NE 31ST AVENUE
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: NOVARA, VINCENZO
Address: 8954 COLLINS AVE
City-St-Zip: SURFSIDE, FL 33154

Title: MGRM () Delete
Name: NOVARA, JEANETTE
Address: 21239 NE 31 AVE
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JEANETTE NOVARA

MGRM

04/28/2007

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