

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000012300

Entity Name: B. A. & R. INVESTMENTS, LLC

FILED
Jan 16, 2007
Secretary of State

Current Principal Place of Business:

2400 EAST COMMERCIAL BOULEVARD, SUITE 820
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

2400 EAST COMMERCIAL BOULEVARD, SUITE 820
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 20-2296578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, THOMAS M
2400 EAST COMMERCIAL BOULEVARD, SUITE 820
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BEJUSCA, PETER
Address: 3750 GALT OCEAN DRIVE, #1706
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: RIF, MARCEL
Address: 6280 SW 56TH COURT
City-St-Zip: DAVIE, FL 33314

Title: MGR () Delete
Name: MERCEDE EXECUTIVE PA, RK, LLC
Address: 3850 OTTOWA LANE
City-St-Zip: COOPER CITY, FL 33026

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 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: MARCEL RIF

MGR

01/16/2007

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