

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000025002

Entity Name: R & B PROPERTIES, LLC

FILED
Mar 26, 2006
Secretary of State

Current Principal Place of Business:

3310 NW 75TH, TERRACE
LAUDERHILL, FL 33319

New Principal Place of Business:

13292 NW 6TH CT
PLANTATION, FL 33325

Current Mailing Address:

P.O. BOX 452066
SUNRISE, FL 33345

New Mailing Address:

FEI Number: 20-2527866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENITO, LAURA
3310 NW 75TH, TERRACE
LAUDERHILL, FL 33319 US

Name and Address of New Registered Agent:

BENITO, LAURA
13292 NW 6 TH, CT
PLANTATION, FL 33325 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: BENITO, LAURA

03/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BENITO, LAURA
Address: 3310 NW 75TH, TERRACE
City-St-Zip: LAUDERHILL, FL 33319

Title: MGRM () Delete
Name: RAMS, YOLANDA C
Address: 3310 NW 75TH, TERRACE
City-St-Zip: LAUDERHILL, FL 33319

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BENITO, LAURA
Address: 13292 NW 6TH CT
City-St-Zip: PLANTATION, FL 33325

Title: MGRM (X) Change () Addition
Name: RAMS, YOLANDA C
Address: 13292 NW 6TH CT
City-St-Zip: PLANTATION, FL 33325

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: BENITO, LAURA

MGRM

03/26/2006

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