

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032733

Entity Name: A & R BUILDERS, LLC

FILED
Feb 25, 2008
Secretary of State

Current Principal Place of Business:

1100 ATLANTIC SHORES BLVD
APT#405
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

1100 ATLANTIC SHORES BLVD
APT#405
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 20-2654253

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RABENA, ALFRED
1100 ATLANTIC SHORE BLVD
APT # 405
HALLANDALE, FL 33009 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: RABENA, ALFRED
Address: 1100 ATLANTIC SHORE BLVD #405
City-St-Zip: HALLANDALE, FL 33009

Title: MGR () Delete
Name: ARISTEO, WILLIAM
Address: 1100 ATLANTIC SHORE BLVD #405
City-St-Zip: HALLANDALE, FL 33009

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: CRANE, ELEANOR M
Address: 789 VALLEY AVENUE
City-St-Zip: HAMMONTON, NJ 080371

Title: MGR () Change (X) Addition
Name: RABENA, MICHAEL
Address: 1001 THREE ISLANDS BLVD. #37
City-St-Zip: HALLANDALE, FL 33009

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: ALFRED RABENA

MGR

02/25/2008

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