## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**DOCUMENT # L05000038865** 

1. Entity Name

FOREST CLUB RB-GEM-LLC



FILED Apr 21, 2008 08:00 A Secretary of State

CR2E083 (12/07)

Principal Place of Business

4937 S.W. 75 AVE. BUILDING B, UNIT 21 MIAMI, FL 33155 Mailing Address

4937 S.W. 75 AVE. BUILDING B, UNIT 21 MIAMI, FL 33155



DO NOT WRITE IN THIS SPACE
4. FEI Number

El Number Applied For

4. FEI Number Applied For Not Applied For Not Applied For Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ-VALLE, MARIA 10570 N.W. 27TH STREET, UNIT 103 MIAMI, FL 33172 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

## FiLE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000910539 05/07/08-80005-010 138.75

9.	MANAGING MEMBERS/MANAGERS	9 1	, 🖟 (	4			. 1			ta .	t in F		and a second	Land Land	¥"::	,,,,(* <del>(*</del> )	1 'A	1 to 10	
TITLE	MGRM	4	l <sub>pr</sub>	1	ria. Literatus	â ;.	1.	1.			4, 1			18.			437		
NAME	RB-GEM MANAGEMENT LLC	5 fg.				13.4	7		( )   ) 		ر مر به ده مواجعه	146	11 3 3 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	: 1 1	¥ 44	4.4		4 21	1
STREET ADDRESS	4937 S.W. 75 AVE. BUILDING B UNIT 21	an d	eir.	1	w.	411	÷−سي رياد	do.s	44.5	11.4	11				man.	i tu		1, 1	
CITY-ST-ZIP	MIAMI, FL 33173	: ( ). 3 h			,43		护	즐레			Hist.		31333 50 41 1		1				为国
TITLE		i i		l l'	•	e t	Ų,	7	1	1 ii	1 1 2	31. !	. To the Atlanta	, h		铸造	きまき	្រឹក្ស	5 民族
NAME			1.00				g. `.		h j		1 1	В							<b>(</b> 5: 4
STREET ADDRESS		1		, ,	)		````		( ) ;		11	100	11 (S) (S)	ች የተቀ ታ	7.10	-14 A-1	}	4 1 4	1 0 nd
CITY-ST-ZIP		- A1	and in	: 4	<b>h.</b> *	# 4	,	3	1	4.7	700	P L	138			1)l. 10	, 41		
TITLE		ì n	4	ان چائے۔ سات	B) 1		# F						1.				1 1 4 1		
NAME		.;	lu ;	*	# <sup>*</sup>		e èj pe t	ارد. ایرنگ	14	神神	114	\$ 4·	1	r C. F.		134	A. Th	*	, ,
STREET ADDRESS		ય હ	4, t.			, B. 6	£ 1.		À	S N			VA)	ed,de ■	a.s- ir	W.		) 1 4(3) 4(	
CITY-ST-ZIP		16 i	1	1	4 K	1.4	, ,	پ	U	įN	پ		W	MI,		14.1	1 1	44	
TITLE		b † • d	ائر تو آئران			, , , , , ,	· † ,	ΉN		TL	۱۱۲	2	SP	<b>\</b> (	, E	ih ii		À À	
NAME			17.		1	B) 4-1		å∎∎' Jagate		64			<b>3</b> F		0.00	P 5, t	4	HY	484 S
STREET ADDRESS			4.	) 11 F		1 (* *) 1 (*)			Transfer of			Fat.	科科	ta, 1′ 53 m } } }		, H.		1.33	
CITY-ST-ZIP		1	ļ,	44	1, 5	के होती वर्ष	36:	4.8			44		) 3-16	43.	July 1				
TITLE			1.	ัย	)  -	ائا ہے۔ بارگرا	. Je k	<b>\</b> [	. if 19.1		1	Til		1711	4		可有所	<b>1</b> -	,4 <u>4 </u>
NAME		1		3	77 a 11 s			e i	8 1.1	11	117		4	r I,		1	- β.π 5. χ. 1	SH	
STREET ADDRESS			اف.) أو دان	5	4		i, l' :		温1		油铁		1, 1,	8.5.1 a 1.1	3.30			, "	37 3
CITY-ST-ZIP		y i J			1		į,	2 (* c	N A	4 36 16	. t. ₩			4	4	r iriji Linda j		(	:
TITLE		9	i, i,	1 H	3.4	¥ .					13		11.1				AJ#		
NAME			5.	į i, i	, ,	 1	ļ.,		1 111	14. li 1-15-1			144	Ed p		R.		1711-17 14-5	
STREET ADDRESS	( )	1	in the	i, i	h t		1.1	.t.	g E	di i	16 h 'fl	37E	h C	1.1		9 4 E.	3.4		
CITY-ST-ZIP	/ -	魯	47		11.4	- 9 - 9	11.	44-1	1		4.5								
11. I hereby certify that the information supplied with this filling 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									ation f the										

11. I hereby certify that the information supplied with this filling 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 empreceded to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGUM MEMBER, OR AUTHORIZED REFRESENTATIVE

4/7/08

Daytime Phone #