

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039461

Entity Name: R&A LLC

FILED  
Apr 25, 2008  
Secretary of State

## Current Principal Place of Business:

5442 NW COUNTY RD 661A  
ARCADIA, FL 34266

## New Principal Place of Business:

4846 N UNIVERSITY DRIVE  
#311  
LAUDERHILL, FL 33351

## Current Mailing Address:

9375 NW 49 PL  
SUNRISE, FL 33351

## New Mailing Address:

4846 N UNIVERSITY DRIVE  
#311  
SUNRISE, FL 33351

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

STARFISH NETWORKS INC  
1018 THOMASVILLE RD  
SUITE 101  
TALLAHASSEE, FL 32303 US

## Name and Address of New Registered Agent:

STARFISH NETWORKS INC  
2124 DELTA BLVD.  
TALLAHASSEE, FL 32303 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: JAMES ZAJDEL

04/25/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: ARISTIZABAL, IVAN D  
Address: 550 CARRINGTON DRIVE  
City-St-Zip: WESTON, FL 33326

Title: MGRM ( ) Delete  
Name: RAMON, APOLINAR  
Address: 9375 NW 49 PL  
City-St-Zip: SUNRISE, FL 33351

## ADDITIONS/CHANGES:

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: APOLINAR RAMON

MGRM

04/25/2008

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