

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000044718

Entity Name: RYMAR HOLDINGS, LLC

FILED  
Jan 12, 2007  
Secretary of State

## Current Principal Place of Business:

1860 OLD OKEECHOBEE ROAD  
SUITE # 201  
WEST PALM BEACH, FL 33409 US

## New Principal Place of Business:

10745 LOCUST STREET  
PALM BEACH GARDENS, FL 33418 US

## Current Mailing Address:

10745 LOCUST STREET  
PALM BEACH GARDENS, FL 33418 US

## New Mailing Address:

FEI Number: 76-0790567      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARKS, STEVEN C  
10745 LOCUST STREET  
PALM BEACH GARDENS, FL 33418 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: MGRM ( ) Delete  
Name: MARKS, SHELLEY R  
Address: 10745 LOCUST STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: MGR ( ) Delete  
Name: MARKS, STEVEN C  
Address: 10745 LOCUST STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

## ADDITIONS/CHANGES:

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

Title: MGRM (X) Change ( ) Addition  
Name: MARKS, STEVEN C  
Address: 10745 LOCUST STREET  
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: STEVEN C. MARKS

MGRM

01/12/2007

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