


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000060421	
1. Entity Name RAIMUNDO PROPERTIES L.L.C.	

Principal Place of Business 311 SW 100 AVENUE PEMBROKE PINES, FL 33025	Mailing Address PO BOX 245250 PEMBROKE PINES, FL 33024
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DO NOT WRITE IN THIS SPACE

FILED
Jul 22, 2008 08:00 AM
Secretary of State



07182008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 23-3088614	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent RAIMUNDO, CHRISTOPHER S 311 SW 100 AVENUE PEMBROKE PINES, FL 33025

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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: <u>Christopher S. Raimundo (President)</u>	DATE: <u>7-18-2008</u>
<small>Signature, typed or printed name of registered agent and title if applicable.</small>	<small>(NOTE: Registered Agent signature required when renewing)</small>

FILE NOW!!! FEE IS \$138.75 + \$5.00 In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.
Due by September 12, 2008
\$143.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RAIMUNDO, CHISTOPHER S 311 SW 100 AVENUE PEMBROKE PINES, FL 33025
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PT RAIMUNDO, CHISTOPHER S 311 SW 100 AVENUE PEMBROKE PINES, FL 33025
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S RAIMUNDO, MARIA A 311 SW 100 AVENUE PEMBROKE PINES, FL 33025
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U000000955891
07/22/08-80011-002 143.75

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

SIGNATURE: <u>Christopher S. Raimundo, CHRISTOPHER S. RAIMUNDO</u>	DATE: <u>7-18-08</u>	DAYTIME PHONE: <u>954-885-9641</u>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone #</small>