

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000086222

Entity Name: RAIDAN REALTY GROUP, LLC

FILED
Apr 26, 2006
Secretary of State

Current Principal Place of Business:

7483 S.W. 82ND STREET, #A-103
MIAMI, FL 33143

New Principal Place of Business:

Current Mailing Address:

7483 S.W. 82ND STREET, #A-103
MIAMI, FL 33143

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, RAINIER
7483 S.W. 82ND STREET, #A-103
MIAMI, FL 33143 US

Name and Address of New Registered Agent:

RODRIGUEZ, DANIEL J
6810 SW 45 LN
2
MIAMI, FL 33155 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: DANIEL J. RODRIGUEZ

04/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LEON, RAINIER
Address: 7483 S.W. 82ND STREET, #A-103
City-St-Zip: MIAMI, FL 33143

Title: MGRM () Delete
Name: RODRIGUEZ, DANIEL J
Address: 6510 S.W. 45TH LANE, #2
City-St-Zip: MIAMI, FL 33155

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: RODRIGUEZ, DANIEL J
Address: 6810 SW 45 LN #2
City-St-Zip: MIAMI, FL 33155

Title: MGRM (X) Change () Addition
Name: LEON, RAINIER J
Address: 7483 S.W. 82ND STREET, #A-103
City-St-Zip: MIAMI, FL 33143

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: DANIEL J. RODRIGUEZ

MGRM

04/26/2006

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