

2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90038 026 ****50.00

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1. Entity Name
ROBIN EDWARDS & CO, LLC



Principal Place of Business

PO BOX 341435
TAMPA, FL 33694

Mailing Address

PO BOX 341435
TAMPA, FL 33694

00011000



04092007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3818407	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDUJAR, ROBIN
7800 66TH STREET NORTH
PINELLAS PARK, FL 33781
*812 Court Street
Clearwater, FL
33756*

**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

Robin Edwards, Managing Member

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	ANDUJAR, ROBIN
STREET ADDRESS	148 KEARNY AVENUE
CITY-STATE-ZIP	PERTH AMBOY, NJ 08861
TITLE	MGRM
NAME	ANDUJAR, EDWARDS
STREET ADDRESS	1226 S. MISSOURI AVE.
CITY-STATE-ZIP	CLEARWATER, FL 33756
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:

Robin Edwards

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

04/17/07