

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100617

Entity Name: RJV, LLC

FILED
Mar 09, 2006
Secretary of State

Current Principal Place of Business:

16480 NW 48TH AVE
HIALEAH, FL 33014

New Principal Place of Business:

Current Mailing Address:

16480 NW 48TH AVE
HIALEAH, FL 33014

New Mailing Address:

FEI Number: 20-3646225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PLOUCHA, LM
1 SE 3RD AVE SUITE 1400
FT LAUDERDALE, FL 33394 US

Name and Address of New Registered Agent:

DIROSA, JENNIE J
16480 NW 48TH AVE
MIAMI, FL 33014 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: JENNIE J DIROSA

03/09/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MEM () Change (X) Addition
Name: FIORI, ROSEMARIE M
Address: 16480 NW 48TH AVENUE
City-St-Zip: MIAMI, FL 33014

Title: MEM () Change (X) Addition
Name: DIROSA, JENNIE J
Address: 16480 NW 48TH AVENUE
City-St-Zip: MIAMI, FL 33014

Title: MEM () Change (X) Addition
Name: DIROSA, VINCENT G
Address: 16480 NW 48TH AVENUE
City-St-Zip: MIAMI, FL 33014

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: JENNIE J DIROSA

MEM

03/09/2006

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