2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000104625

Entity Name: RCTD, LLC

FILED Feb 19, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10240 S.W. 133 CT 210 WEST COWLES STREET MIAMI, FL 33186 ENGLEWOOD, FL 34223

Current Mailing Address: New Mailing Address:

C/O MAHONEY COHEN AND COMPANY 1200 BRICKELL AVE., SUITE 700 PO BOX 1323

ENGLEWOOD, FL 34295

MIAMI, FL 33131

FEI Number: 20-3817606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

JOHNSON, ROBERT B CPA SMITH, DAVID N 10240 S.W. 133 CT 210 W COWLES STREET

MIAMI, FL 33186 US ENGLEWOOD, FL 34223

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: DAVID SMITH 02/19/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: () Change () Addition () Delete

JOHNSON, ROBIN H Name: Name: 10240 S.W. 133 CT Address: Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip:

Title: MGR Title: () Delete () Change () Addition Name:

JOHNSON, CARMEN M Name: Address: 10240 S.W. 133 CT Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition BERND-COHEN, TINA BERND-COHEN, TINA Name: Name:

729 POWER STREET Address: Address: PO BOX 1323

City-St-Zip: HELENA, MT 59601 City-St-Zip: ENGLEWOOD, FL 34295

Title: MGR () Delete Title: MGR (X) Change () Addition

SMITH, DAVID Name: SMITH, DAVID N Name: Address: 729 POWER STREET Address: PO BOX 1323

City-St-Zip: HELENA, MT 59601 City-St-Zip: ENGLEWOOD, FL 34295

I hereby certify that the information supplied with this filing does not qualify 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: DAVID SMITH 02/19/2008