2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 14, 2008 08:00 Al Secretary of State

DOCUMENT 7	# L05000114004
1. Entity Name	
BBCDRB, LLC	



Principal Place of Business

Mailing Address

7200 N DIXIE HWY BOCA RATON, FL 33487

3595 COMMODORE CIR DELRAY BEACH, FL 33483



01152008 No Chg-LLC

CR2E083 (12/07)

561-718-9760

Daytime Phone #

4. FEI Number	Applied For	
20-3875884	Not Applicable	
5. Certificate of Status Desired	\$5.00 Additional	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

FELLER, JOSEPH N 8188 SOUTH CORAL CIRCLE NORTH LAUDERDALE, FL 33068

the obligations of registered agent.

DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agont and title if applicable	(NO1E: Registered Agent signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.75		000000895377
9.	MANAGING MEMBERS/MANAGERS		04/24/08-80066-D19 138.75
DHE	MGRM		
NAME	PISER, TIMOTHY H		
STREET ADDRESS	3595 COMMODORE CIRCLE		
CITY-ST-ZIP	DELRAY BEACH, FL 33483		
TITLE	MGRM		i
NAME	YURIT, JOHN		
STREET ADDRESS	3595 COMMODORE CIRCLE		i
CITY-ST-ZIP	DELRAY BEACH, FL 33483		
TITLE			
NAME			
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11. Thereby 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 path; 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.			

TIMOTHY H.

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

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