2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L05000118083

1. Entity Name
GALLOWOOD RB-GEM-LLC

Principal Place of Business	Mailing Address
4937 S.W.75 AVE BUILDING B UNIT 21 MIAMI, FL 33155	4937 S.W.75 AVE BUILDING B UNIT 21 MIAMI, FL 33155

DO NOT WRITE IN THIS SPACE

04262007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
20-3935876	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

FERNANDEZ-VALLE, MARIA
10570 N.W. 27TH ST., UNIT 103
MIAMI, FL 33172

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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
Signature, typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee Is $50.00
Due by May 1, 2007

U00000761212
05/25/07-80050-014 50.00

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	RB-GEM MANAGEMENT LLC
STREET ADDRESS	4937 S.W.75 AVE BUILDING B UNIT 21
CITY-ST-ZIP	MIAMI, FL 33173
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #