

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011844

Entity Name: RCBM INVESTMENTS LLC

FILED
May 24, 2007
Secretary of State

Current Principal Place of Business:

812 GOLDEN CANE DRIVE
WESTON, FL 33327

New Principal Place of Business:

12815 NW 45 AVE
6B
OPA LOCKA, FL 33054

Current Mailing Address:

812 GOLDEN CANE DRIVE
WESTON, FL 33327

New Mailing Address:

12815 NW 45 AVE
6B
OPA LOCKA, FL 33054

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAZZUCCO, BENEDETTO
812 GOLDEN CANE DRIVE
WESTON, FL 33327 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CENTOFANTI, RAFAEL
Address: 812 GOLDEN CANE DRIVE
City-St-Zip: WESTON, FL 33327

Title: MGRM () Delete
Name: MAZZUCO, BENEDETTO
Address: 812 GOLDEN CANE DRIVE
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CENTOFANTI, ALEXANDRO
Address: 27320 SW 154 AVE
City-St-Zip: HOMESTEAD, FL 33032

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BENEDETTO MAZZUCCO

MGRM

05/24/2007

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