

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000036575

FILED
Jul 05, 2007
Secretary of State

Entity Name: RELIABLE PROPERTY MANAGEMENT GROUP, LLC.

Current Principal Place of Business:

8524 BREEZY HILL DR.
BOYNTON BEACH, FL 33437 US

New Principal Place of Business:

Current Mailing Address:

8524 BREEZY HILL DR.
BOYNTON BEACH, FL 33437 US

New Mailing Address:

FEI Number: 56-2572475 FEI Number Applied For () 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:

POLISSKY, MICHAEL
20931-1 VIA JASMINE
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

POLISSKY, MICHAEL
8524 BREEZY HILL DR.
BOYNTON BEACH, FL 33437 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: MICHAEL POLISSKY

07/05/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: POLISSKY, MICHAEL
Address: 20931-1 VIA JASMINE
City-St-Zip: BOCA RATON, FL 33428 US

Title: MGRM () Delete
Name: KATS, VITALIY
Address: 19424 DAKOTA COURT
City-St-Zip: BOCA RATON, FL 33434 US

ADDITIONS/CHANGES:

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

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: MICHAEL POLISSKY

PRES

07/05/2007

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