## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000049383

Entity Name: RUBYROSE LLC

City-St-Zip:

KIEV, UA UA

FILED Feb 19, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3254 CULLENDON LANE JACKSONVILLE, FL 32225 US **Current Mailing Address: New Mailing Address:** 3254 CULLENDON LANE JACKSONVILLE, FL 32225 US FEI Number: 20-4931637 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DRAPKIN, DAVID 3254 CULLENDON LANE JACKSONVILLE, FL 32225 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete DRAPKIN, DAVID Name: Name: Address: 3254 CULLENDON LANE Address: City-St-Zip: JACKSONVILLE, FL 32225 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition Name: HOGE, JAY Name: Address: DZIVOLKA 22. OZOLCIEMA IELA 22/1 Address: City-St-Zip: RIGA, LV LV-1058 LV City-St-Zip: Title: MGRM () Delete Title: () Change () Addition ZHIGALO, LARISSA Name: Name: WILHELM PICK STREET, 14-37 Address: Address:

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.

City-St-Zip:

SIGNATURE: DAVID STEVEN DRAPKIN MGRM 02/19/2008