

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000064796

Entity Name: RINOS PROPERTIES, LLC

FILED
May 01, 2007
Secretary of State

Current Principal Place of Business:

1983 EIDSON DRIVE
DELAND, FL 32724

New Principal Place of Business:

1753 LEXINGTON AVENUE
SUITE A
DELAND, FL 32724

Current Mailing Address:

1983 EIDSON DRIVE
DELAND, FL 32724

New Mailing Address:

1234 HERON POINT WAY
DELAND, FL 32724

FEI Number: 20-5483242 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

JACOBSEN, KERRY
1755 LEXINGTON AVENUE
SUITE B
DELAND, FL 327242418 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: MIRACHI, JON
Address: 2 RHEA RUN
City-St-Zip: NEWTON, NJ 078601467

Title: MGR () Delete
Name: JACOBSEN, KERRY
Address: 1755 LEXINGTON AVENUE
City-St-Zip: DELAND, FL 327242148

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MIRACHI, JON
Address: 1234 HERON POINT WAY
City-St-Zip: DELAND, FL 32724

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: JON MIRACHI

MGRM

05/01/2007

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