2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000069086

1. Entity Name

RSC PEACHTREE, LLC



Principal Place of Business

1660 N.E. MIAMI GARDENS DRIVE

SUITE ONE

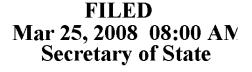
NORTH MIAMI BEACH, FL 33179

Mailing Address

1660 N.E. MIAMI GARDENS DRIVE

SUITE ONE

NORTH MIAMI BEACH, FL 33179





01042008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
20-5205024		Not Applicable
5. Certificate of Status Desired	\$5.00	O Additional

6. Name and Address of Current Registered Agent

ROYAL SENIOR CARE LLC 1660 N.E. MIAMI GARDENS DRIVE SUITE ONE NORTH MIAMI BEACH, FL 33179 DO NOT WRITE
IN THIS SPACE

. 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)

04/09/08-80060-007 138.75

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

9.	. MANAGING MEMBERS/MANAGERS		
TITLE	MGR		
NAME	BITTAN, AVI		
STREET ADDRESS	1660 NE MIAMI GARDENS DR #1		
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179		
TITLE	MGR		
NAME	SOFFER, AHARON		
STREET ADDRESS	1660 NE MIAMI GARDENS DR #1		
CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179		
TITLE			
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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 spall 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:

D OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR ANTHORIZED REPRESENTATION

3.24.08

305 - 944 7988

Daytime Phone #