


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L06000076738 1. Entity Name R.Q HOME IMPROVEMENT L.C	
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Principal Place of Business 1103 WINDHORST RIDGE DR BRANDON, FL 33510	Mailing Address 1103 WINDHORST RIDGE DR BRANDON, FL 33510
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03122008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 42-1731955	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent SAINT-HILAIRE, CLARA MRS 1103 WINDHORST RIDGE DR BRANDON, FL 33510	DO NOT WRITE IN THIS SPACE
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8. 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 _____ (NOTE: Registered Agent signature required when reinstating) 05/21/08-800835-022 138.75

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SAINT-HILAIRE, CLARA 1103 WINDHORST RIDGE DR BRANDON, FL 33510
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR QUEZADA, RAMON 1103 WINDHORST RIDGE DR BRANDON, FL 33510
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 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: X Clara Saint-Hilaire Date: 4/25/08 Phone #: 813-486-4981