

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000077747

Entity Name: ROB-CESAR, LLC

FILED
Aug 21, 2007
Secretary of State

Current Principal Place of Business:

8177 GLADES ROAD
BAY 3 WEST BOCA PLACE
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

8177 GLADES ROAD
BAY 3 WEST BOCA PLACE
BOCA RATON, FL 33434 US

New Mailing Address:

FEI Number: 20-5343832 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:

PAPA, JOSEPH F
1300 N. FEDERAL HWY.
SUITE 107
BOCA RATON, FL 33432 US

Name and Address of New Registered Agent:

UGARRIZA, CESAR
8177 GLADES ROAD
BAY 3
BOCA RATON, FL 33434 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: CESAR UGARRIZA

08/21/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: UGARRIZA, CESAR
Address: 2193 BIG WOOD CAY
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: MGRM () Delete
Name: WUENSCH, ROBERT J
Address: 8617 N.W. 82 STREET
City-St-Zip: TAMARAC, FL 33321 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: CESAR UGARRIZA

PRES

08/21/2007

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