

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000079921

Entity Name: RE ENTERPRISES LLC

FILED
May 07, 2007
Secretary of State

Current Principal Place of Business:

19228 US HWY 331 SOUTH
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

19228 US HWY 331 SOUTH
FREEPORT, FL 32439

New Mailing Address:

PO BOX 759
FREEPORT, FL 32439

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

ROSALES, JOSE V
19228 US HWY 331 SOUTH
FREEPORT, FL 32439 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: ROSALES, JOSE V
Address: 19228 US HWY 331 SOUTH
City-St-Zip: FREEPORT, FL 32439

Title: MGRM () Delete
Name: ECHAZU, ANDREINA
Address: 19228 US HWY 331 SOUTH
City-St-Zip: FREEPORT, FL 32439

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: ECHAZU, ARTURO H
Address: 19228 US HWY 331 SOUTH
City-St-Zip: FREEPORT, FL 32439

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: JOSE V ROSALES

MGRM

05/07/2007

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