

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000090315

FILED
May 02, 2007
Secretary of State

Entity Name: REID INVESTMENT GROUP LLC

Current Principal Place of Business:

2304 SE 23 TERR
HOMESTEAD, FL 33035

New Principal Place of Business:

Current Mailing Address:

2304 SE 23 TERR
HOMESTEAD, FL 33035

New Mailing Address:

FEI Number: 06-1793164 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:

RAR ENTERPRISE LTD
2304 SE 23 TERR
HOMESTEAD, FL 33035 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: MGR () Delete
Name: REID, RICHARD A SR
Address: 2304 SE 23 TERR
City-St-Zip: HOMESTEAD, FL 33035

Title: MGRM () Delete
Name: HARSHANIOVA, LARYSA
Address: 2304 SE 23 TERR
City-St-Zip: HOMESTEAD, FL 33035

Title: MGRM () Delete
Name: REID, RICHARD A JR
Address: 11625 SW 170 STREET
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES:

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

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: RICHARD REID SR

MGR

05/02/2007

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