

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104749

FILED  
Apr 11, 2007  
Secretary of State

Entity Name: RE INVESTMENT HOLDINGS, LLC

## Current Principal Place of Business:

2751 EXECUTIVE PARK DRIVE, SUITE 104  
WESTON, FL 33331 US

## New Principal Place of Business:

2751 EXECUTIVE PARK DRIVE  
SUITE 104  
WESTON, FL 33331 US

## Current Mailing Address:

2751 EXECUTIVE PARK DRIVE, SUITE 104  
WESTON, FL 33331 US

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

EISEN, SCOTT  
2751 EXECUTIVE PARK DRIVE, SUITE 104  
WESTON, FL 33331 US

## Name and Address of New Registered Agent:

EISEN, SCOTT  
2751 EXECUTIVE PARK DRIVE  
SUITE 104  
WESTON, FL 33331 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:

04/11/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: EISEN, SCOTT  
Address: 2751 EXECUTIVE PARK DRIVE, SUITE 104  
City-St-Zip: WESTON, FL 33331 US

Title: MGRM ( ) Delete  
Name: RAFFALSKI, PETER  
Address: 5885 SW 118 ST.  
City-St-Zip: CORAL GABLES, FL 33156 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 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: SCOTT EISEN

MGR

04/11/2007

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