2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

URE: MONTH STORY OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

FILED Feb 25, 2008 08:00 AM Secretary of State

DOCUMENT # L06000106029 1. Entity Name ROSA RIVERFRONT, LLC					Secretai	·
Principal Place 2018 EAST 7 TAMPA, FL 3	TH AVENUE	Mailing Address 2018 EAST 7TH AVENUE TAMPA, FL 33605		 	1187 1188 38118 8831 8878 111	1JE 1 778 37 (M. 1884
		The state of the s		02122008No Chg-LLC	CR2E083 (12	
D	O NOT WRITE	IN THIS SPA	CE	4. FEI Number 59-7227222		Applied For
				5. Certificate of Status Desired	□ \$5.00 Fee Red	Not Applicable Additional juired
	6. Name and Address of Current Ro THOMAS P 77TH AVENUE _ 33605	gisured Agant		DO NOT W		
the obligati	named entity submits this statement for tons of registered agent. Signature, typed or printed name of registered agent and		red office or register		lorida. I am familiar v	with, and accept
After May	NOW!!! FEE IS \$138.75 1, 2008 Fee will be \$538.75					
S. HILE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBER MGR FERNANDEZ, BRENDA L 2018 EAST 7TH AVE TAMPA, FL 33604	S/MANAGERS	_	<u></u>	0000835254	
TIFLE NAME STREET ADDRESS CITY-ST-ZIP				U2/29,	708-80027-o	09 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT W		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SI	PACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					-	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
11. I hereby of indicated limited lia	certify that the information supplied with on this report is true and accurate and bility company or the receiver or trustee	this filing does not qualify for the e that my signature shall have the sa empowered to execute this report	exemptions containe ame legal effect as as required by CH	od in Chapter 119, Florida Statutes if made under oath; that I am a m apter 608, Florida Statutes.	. I further certify that anaging member or	the information manager of the