2008 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Mar 25, 2008 08:00 AM Secretary of State DOCUMENT # L06000121886 1. Entity Name RSC HERON EAST, LLC Principal Place of Business Mailing Address 1660 NE MIAMI GARDENS DRIVE STE ONE 1660 NE MIAMI GARDENS DRIVE STE ONE NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179 01042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-8096705 \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ROYAL SENIOR CARE LLC DO NOT WRITE 1660 NE MIAMI GARDENS DRIVE STE ONE NORTH MIAMI BEACH, FL 33179 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 04/09/08-80058-017 138.75 FILE NOW!!! FEE 18 \$138,75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS MGR TITLE NAME BITTAN, AVI STREET ADDRESS 1660 NE MIAMI GARDENS DR #1 CITY - ST- ZIP NORTH MIAMI BEACH, FL 33179 TITLE SOFFER, AHARON NAME STREET ADDRESS 1660 NE MIAMI GARDENS DR #1 CITY - ST- 7/P NORTH MIAMI BEACH, FL 33179 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY+ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signaphre 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 empoyages to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF

SING MEMBER, OR AUTHORIZED REPRESENTATIVE

3.24.08

Daytime Phone #