

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009772

Entity Name: R K ENTERPRISE LLC

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

4733 W WATERS AVE
APT 715
TAMPA, FL 33614

New Principal Place of Business:

4733 W WATERS AVE
APT 715
TAMPA, FL 33614 US

Current Mailing Address:

4733 W WATERS AVE
APT 715
TAMPA, FL 33614

New Mailing Address:

4733 W WATERS AVE
APT 715
TAMPA, FL 33614 US

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNORS SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 32301-296 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: SANCHEZ, ROBERT
Address: 200 AKIBA RD UNIT #1
City-St-Zip: STROUDSBURG, PA 18360

Title: MGRM () Delete
Name: VITORINO, KENDRY J
Address: 4733 W WATERS AVE APT 715
City-St-Zip: TAMPA, FL 33614

ADDITIONS/CHANGES:

Title: D (X) Change () Addition
Name: VITORINO, KENDRY
Address: 4733 W WATERS AVE APT 715
City-St-Zip: TAMPA, FL 33614

Title: D (X) Change () Addition
Name: SANCHEZ, ROBERT
Address: 200 AKIBA RD
City-St-Zip: STROUDSBURG, PA 18360

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: KENDRY J VITORINO

MGRM

04/23/2008

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