2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000115902

Entity Name: RSC AVENTURA STERLING, LLC

FILED Feb 24, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1660 N.E. MIAMI GARDENS DRIVE, STE ONE 1660 N.E. MIAMI GARDENS DRIVE, STE 8 NORTH MIAMI BEACH, FL 33179

NORTH MIAMI BEACH, FL 33179

Current Mailing Address: New Mailing Address:

1660 N.E. MIAMI GARDENS DRIVE, STE ONE 1660 N.E. MIAMI GARDENS DRIVE, STE 8

NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179

FEI Number: 26-1420902 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROYAL SENIOR CARE, LLC ROYAL SENIOR CARE, LLC 1660 N.E. MIAMI GARDENS DRIVE, STE ONE 1660 N.E. MIAMI GARDENS DRIVE, STE 8 NORTH MIAMI BEACH, FL 33179 NORTH MIAMI BEACH, FL 33179

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: 02/24/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete (X) Change () Addition

BITTAN, AVI RITAN AVI Name: Name: Address: 1660 NE MIAMI GARDENS DR #1 Address: 1660 NE MIAMI GARDENS DR #8

City-St-Zip: MIAMI, FL 33179 City-St-Zip: NORTH MIAMI BEACH, FL 33179

(X) Change () Addition Title: MGR () Delete Title: MGR Name: SOFFER, AHARON Name: SOFFER, AHARON

Address: 1660 NE MIAMI GARDENS DR #1 Address: 1660 NE MIAMI GARDENS DR #8

City-St-Zip: MIAMI, FL 33179 City-St-Zip: NORTH MIAMI BEACH, FL 33179

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: AVI BITTAN 02/24/2009