

**2008 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED** 96  
**Mar 03, 2008 08:00 A**  
**Secretary of State**

**DOCUMENT # L94000000679**

1. Entity Name  
**ROYAL ISLE APARTMENTS, L.C.**



Principal Place of Business  
**7905 EAST DRIVE MANAGEMENT OFFICE  
APT. #7A  
NO. BAY VILLAGE, FL 33141**

Mailing Address  
**C/O J HERNANDEZ  
1150 NW 72ND AVE #555  
MIAMI, FL 33126**



01192008 No Chg-LLC

CR2E083 (12/07)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**65-0541888**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**WASERSTEIN, RICHARD  
913 NORMANDY DRIVE  
MIAMI BEACH, FL 33141**

**DO NOT WRITE  
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 \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reattesting)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75  
After May 1, 2008 Fee will be \$538.75**

000000845261  
03/13/08-80032-001 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGRM  
RANCANO, NIVARDO  
C/O 7905 E. DRIVE MANAGEMENT OFFICE  
NO. BAY VILLAGE, FL 33141**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 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:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #