2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # L9600000940 1. Entity Name						Ļ	ND LED			
R&A INVESTMENTS, L.C.						100 APR 25				
Principal Place of Business Mailing Address					7	SECRETAR	Y OF STA	TE		
2160 WEST 80 HIALEAH FL 3) STREET	C/O HAROLD GOBSTEI 1836 MONTE CARLO W	C/O HAROLD GOBSTEIN 1836 MONTE CARLO WAY CORAL SPRINGS FL 33071-7829			SECRETAR DALLAHASS				
		CORAL SPRINGS TE SE	JO11-7023	•						
2. Principal Place of Business		3. Mailing Address	3. Mailing Address			60 KILGE KIKIG OKIGE BIG KILGER 		# 00110 101111 I	H O O BO O 1001	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				M TON OG	TE IN THIS SF			1
City & State		City & State	City & State		4. FEI N	65-0707469			plied For t Applicable	1
Zip	Country Zip		Count	Country		icate of Status Desired		5.00 Add ee Required		
···	-6. Name and Address of Curre	ent Registered Agent		Name	7. Nam	and Address of New F	egistered Ac	ent		-
BORAKOV										
	Street Address	(P.O. Box N	umber is Not Acceptable	<i>)</i>						
6196 N.W. 11 STREET, SUITE D SUNRISE FL 33313										
			City				FL	Zip Code		1
R The above	d office or registe									
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SIGNATURE .	Signature, typed or printed name of registered ag	ent and title if applicable (N	OTE Registered	l Agent signature requir	ed when reinstati	na)	DATE			
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		i e		EE IS \$50.00 Department						
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9.		MBERS/MEMBERS	10.			ADDITIONS],
TITLE	MGR	. Deleta	TITLE					Change	Addition	1
STREET ADDRESS	GOBSTEIN, HAROLD 1836 MONTE CARLO WAY			ET ADDRESS						3
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NAME STREET ADDRESS CITY-ST-ZIP				ET ADDRESS ST-ZIP						
11. I hereby o	tertify that the information supplied v	with this filing does not qualify	for the exer	nption stated in S	Section 119.	07(3)(i), Florida Statutes.	further certif	y that the ir	nformation	1
indicated	on this report is true and accurate a bility company or the receiver or true	and that my signature shall hav	ve the same	legal effect as if	made unde	roath; that I am a manag	ging member	or manage	r of the	
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SIGNAT	URE: / Houly	Marules		<i>ال</i>		4/26/00				
	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING MANAGIR	NG MEMBER O	R MANAGER		Date	Day	time Phone #		1