LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000003275

1. Entity Name

R&R Capital Holdings, LLC



FILED SECRETARY OF STATE DIVISION OF CORPORATIONS ...

03 JUN 25 AM 9: 17

DO NOT WRITE IN THIS SPACE

2. Principal Place of Busi	noce	3. Mailing Address	*****		4nanca:	31TH		.r1	
1541 Egret Road	13745 SW 90th Ave			400020305394 06/27/0301039014 **30, 00 do not write in this space					
Suite, Apt. #, etc.		Suite, Apt. #, etc. Apt R-104							
City & State		City & State			4. FEI Number 65-0904348			Applied For	
Homestead, FL		Miami, FL			03-0904348		<u>i</u>	Not Applicable	
^{Zip} 33035	Country Miami-Dade	^{Zip} 33176-6912	Country Miami-Dade		5. Certificate of Status Desired	B	\$5.00 Fee Req	Additional guired	
				7. Name and Address of Current Registered Agent					
•	O NOT W			Name William T. Rudd Street Address (P.O. Box Number is Not Acceptable)					
•	n this sp		13745 SW 9		0th Ave, Apt R-104			, 	
				City			767		

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.

CICNIATURE

Villian J. Kuld

June 21, 2003

DATE

FEE IS 155.00 Rete Chark Payable to Plaride Department state DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM/ William T Rudd 13745 SW 90th Ave, Apt R-104 Miami, FL 33176-6912	iodee Name Street address City-St-89	04/28/0301014016\$25.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM/ Robert D Rosenbloom 1541 Egret Road Homestead, FL 33035	STREET ABORESS CHY-ST-ZP					
TITLE NAME STREET ADDRESS CITY+ST+ZIP	-	icke Nanc Streti Addrese Bity-et-dp	DO NOT WRITE				
TITLE NAME STREET ADDRESS CITY+ST-ZIP		Dige Name Street address Diffest 20	IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY+ST-ZIP	•	tiqle Name Street address City-st-219					
TITLE NAME STREET ADDRESS		TOLE Hame Street address City-St-7P					

11: I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

William J. Rusil

June 21, 2(305-254-0891

Date

Daytime Phone #