2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000003878

1. Entity Name

RAHN BAHIA, LLC

Principal Place of Business

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Mailing Address

501 E. CAMINO BLVD., CORPORATE OFFICES BOCA RATON, FL 33432

P.O. BOX 5025 CORPORATE OFFICE BOCA RATON, FL 33431

FILED Apr 22, 2004 08:00 AM Secretary of State



01292004 No Chq-LLC

CR2E083 (10/03)

4. FEI Number 65-1025844

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

AMERICAN INVORMATION SERVICES, INC. ONE S.E. THIRD AVENUE, 28TH FLOOR MIAMI, FL 33131

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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			
Filing Fee is \$50.00 Due by May 1, 2004			U00000125638 04/23/04-80005-009 50.00
9. IITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGRM RAHN BAHIA, INC. 501 E. CAMINO REAL BOCA RATON, FL 33432		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME 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 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: MaryJo Finocchiaro