


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 29, 2005 8:00 am Secretary of State

04-29-2005 90056 021 ****50.00

DOCUMENT # L99000005603 1. Entity Name RRH MANAGEMENT & OPERATING CO., L.L.C.	
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Principal Place of Business 1890 N.W. 82ND AVENUE MIAMI, FL 33126	Mailing Address 1890 N.W. 82ND AVENUE MIAMI, FL 33126
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DO NOT WRITE IN THIS SPACE



04282005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-0952174	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CARTAYA, PATRICIA C
1890 N.W. 82ND AVENUE
MIAMI, FL 33126

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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 _____
Signature, type or printed name of registered agent and file if applicable (NOTE: Registered Agent signature required when re-electing) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

D. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARTAYA, PATRICIA 1890 N.W. 82ND AVENUE MIAMI, FL 33126
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WRIGHT, DAVID 3363 W. COMMERCIAL BLVD, SUITE 202 FORT LAUDERDALE, FL 33309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: David F. Wright Date: April 28, 05 954-736-2202
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE