2008 LIMITED LIABILITY COMPANY ANNUAL, REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M02000000703

1. Entity Name

RAP EAST, LLC

FILED Jan 14, 2008 08:00 AM Secretary of State

Principal Place of Business

7448 REXFORD RD BOCA RATON, FL 33434 Mailing Address

C/O RAPPAPORT REAL ESTATE 940 THIRD AVENUE NEW YORK, NY 10022



01032008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 30-0002057

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RAPPAPORT, NORMAN P 7448 REXFORD ROAD BOCA RATON, FL 33434

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the purpose of chitions of registered agent.	anging its registered		oth, in the State of Florida.	I am familiar with, and accept
SIGNATURE.	·				······································
	Signature, typed or printed name of registered agent and title if applicable	(NOTE Registered Ag	ent signature required when reinstating)		DATE
After May	E NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				
NAME	RAPPAPORT, NORMAN P				
STREET ADDRESS	940 THIRD AVENUE				
CITY-ST-ZIP	NEW YORK, NY 10022		U00000783279 01/16/08-80008-021 138.75		
TITLE					
NAME					
STREET ADDRESS					

DO NOT WRITE IN THIS SPACE

CITY-ST-ZIP

TITLE STATE ADDRESS
CITY-ST-ZIP

CITY-ST-ZIP

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 trusteen powered to execute this report as required by Chapter.608, Florida Statutes.

SIGNATURE:

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS

CITY-ST-ZIP

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

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

Turasa france 1/10/0