2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M02000000964

1. Entity Name



FILED Jan 23, 2003 8:00 am Secretary of State

01-23-2003 90344 019 ****50.00

	R GROUP LLC								
Principal Plac 75 SECOND AV	/E., Suite 400	Mailing Address 75 SECOND AVE SUITE 400 NEEDHAM MA 02494							
2. Principal Place of Business 7.5 Second Ave Suite, Apt. #, etc.		3. Mailing Address 75 Second Av. Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State	· 1 // /	<u> </u>	1.		4. FEI Numb	er 332069		N	oplied For ot Applicable
Zip 02494		02494	Country			e of Status Desire	,u	\$5.00 Ad Fee Require	ed
C T CORPORATION SYSTEM			Name		7. Name and	d Address of Ne	w Hegistered /	Agent -	
1200	O SOUTH PINE ISLAND ROAD NTATION FL 33324		Street A	reet Address (P.O. Box Number is Not Acceptable)					
FLAI	NIATION PL 33324							_	
			City				FL	Zip Cod	е
	named entity submits this statement for itions of registered agent.	the purpose of changing its req	gistered office or	registere	d agent, or bo	th, in the State of	f Florida. I am f	amiliar with,	and accept
SIGNATURE _		AMTE D					B.475		
	Signature, typed or printed name of registered agent an		egistered Agent signatu		when reinstating)		DATE		
		Make Check Payable	V!!! FEE IS \$ to Florida Dep		t of State				
			By May 1, 2003	3					
9.	MANAGING MEMBER	S/MANAGERS	10.			ADDITIO	NS/CHANGES		
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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.

JRE REC President SIGNATURE: \Signature and typed or Pi MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #