

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003887

FILED
Sep 12, 2005
Secretary of State

Entity Name: SIEERA, LLC

Current Principal Place of Business:

2000 PORTOFINO CIRCLE
APT. # 102
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

344 VIZCAYA DRIVE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

2000 PORTOFINO CIRCLE
APT. # 102
PALM BEACH GARDENS, FL 33418

New Mailing Address:

344 VIZCAYA DRIVE
PALM BEACH GARDENS, FL 33418

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SINGH, ANUPMA
2000 PORTOFINO CIRCLE
APT. # 102
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

SINGH, ANUPMA
344 VIZCAYA DRIVE
PALM BEACH GARDENS, FL 33418 US

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.

SIGNATURE: _____

09/12/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SINGH, ANUPMA S
Address: 2000 PORTOFINO CIRCLE, APT. #102
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SINGH, ANUPMA S
Address: 344 VIZCAYA DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33418

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: ANUPMA SHARMA SINGH

MGRM

09/12/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date