

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 28, 2008 8:00 am
Secretary of State

01-28-2008 90068 019 ***138.75

DOCUMENT # L05000070061

1. Entity Name
 S. A. SIDDIQUI ENTERPRISES LLC



60004108



Principal Place of Business
 3840 BELFORT ROAD
 SUITE 302
 JACKSONVILLE, FL 32216

Mailing Address
 P.O. BOX 442067
 JACKSONVILLE, FL 32222

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

01042008 Chg-LLC CR2E083 (12/06)

4. FEI Number
 51-0551414 Applied For
 Not Applied

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HILL, KAYLEIGH W
 4827 LOUISA TER.
 JACKSONVILLE, FL 32205

7. Name and Address of New Registered Agent

Name: Kayleigh Hill
 Street Address (P.O. Box Number is Not Acceptable):
6710 Collins Rd. Apt #409
 City: Jacksonville FL Zip Code: 32244

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] DATE: 1/7/08

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP		TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	
	MGRM	SIDDIQUI, SAMIR A ESQ.	3840 BELFORT ROAD (SUITE 302)	JACKSONVILLE, FL 32216	<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Ad
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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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [Signature] 01/04/08