

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000063220

Entity Name: SUNSTATE ESTATES LLC

FILED  
Jan 20, 2011  
Secretary of State

**Current Principal Place of Business:**

1887 PERSHORE ROAD  
KINGS NORTON  
BIRMINGHAM B30 3DJ UK, XX XX

**New Principal Place of Business:**

**Current Mailing Address:**

1887 PERSHORE ROAD  
KINGS NORTON  
BIRMINGHAM B30 3DJ UK, XX XX

**New Mailing Address:**

FEI Number: 68-0680895      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

SUPERBIZ REGISTERED AGENT, INC.  
2761 VISTA PARKWAY  
SUITE E4  
WEST PALM BEACH, FL 33411 US

**Name and Address of New Registered Agent:**

CHAUHAN, RAMAN MR  
1887 PERSHORE ROAD  
KINGS NORTON,  
BIRMINGHAM, B30 3DJ, UK., FL UK 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: MR R CHAUHAN

01/20/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CHAUHAN, MEENA  
Address: 1887 PERSHORE ROAD, KINGS NORTON  
City-St-Zip: BIRMINGHAM B30 3DJ UK, XX XX

Title: MGRM  
Name: CHAUHAN, KRISHNA  
Address: 1887 PERSHORE ROAD, KINGS NORTON  
City-St-Zip: BIRMINGHAM B30 3DJ UK, XX XX

Title: MGRM  
Name: CHAUHAN, PRETESH  
Address: 1887 PERSHORE ROAD, KINGS NORTON  
City-St-Zip: BIRMINGHAM B30 3DJ UK, XX XX

Title: MGRM  
Name: CHAUHAN, RAMAN  
Address: 1887 PERSHORE ROAD, KINGS NORTON  
City-St-Zip: BIRMINGHAM B30 3DJ UK, XX XX

I hereby 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: RAMAN CHAUHAN

MR

01/20/2011

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