2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 22, 2007 8:00 am Secretary of State

Principal Place of Business Mailing Address P.O. BOX 3128 OCALA, FL. 34476 OCALA, FL. 34476 OCALA, FL. 34478 OCALA, FL. 34476 OCALA, FL. 34476 OCALA, FL. 34478 OCALA, FL. 34476 OCALA, FL. 34478 OCALA, FL. 34476 OCALA, FL. 34474 OCALA,			
Suite, Apt. #, etc. City & State City & State Country Applied 31-0627512 Status Desired \$5.00 Additional Fee Required Fee Required Fee Required Fee Required Street Address of New Registered Agent Name MANORAMA, BAPATLA 3675 SW 57TH CT OCALA, FL 34474 Sireet Address (P.O. Box Number is Not Acceptable) City FL Zip Code 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 a the obligations of registered agent. Signature. Signature. Signature. Signature required when remaining. Make check payable to Florida Department of State Manorama Make check payable to Florida Department of State Manorama Make Check payable to Florida Department of State Signature. Manorama Make Sirest Address Signature. Manorama Make Sirest Address Signature. Manorama Signature. Manorama Make Sirest Address Signature. Manorama Sirest Address Signature. Manorama Make Sirest Address Signature. Manorama Signature. Manorama Make Sirest Address Signature. Manorama Signature. Manorama Signature. Manorama Manorama Make Sirest Address Signature. Manorama Signature. Manorama Signature. Manorama Make Sirest Address Signature. Manorama Signature. Manorama Signature. Manorama Signature. Manorama Signature. Manorama Make Signature. Manorama	60004328		
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6. Name and Address of Current Registered Agent MANORAMA, BAPATLA 3675 SW 57TH CT OCALA, FL 34474 City City FL Zip Code 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 a the obligations of registered agent. SiGNATURE Filling Fee is \$50.00 Due by May 1, 2007 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES IIILE MGRM MGRM MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES Change			
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11. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the informatic 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 receive or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: SIGNATURE AND TYPED OR PERTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date	on ne		