

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000079724

**FILED**  
**Mar 12, 2012**  
**Secretary of State**

**Entity Name:** ARLEN HOUSE MINI MARKET, LLC

**Current Principal Place of Business:**

500 BAYVIEW DRIVE UNIT W7  
SUNNY ISLES, FL 33160

**New Principal Place of Business:**

500 BAYVIEW DRIVE UNIT W7  
SUNNY ISLES, FL 33160 US

**Current Mailing Address:**

500 BAYVIEW DRIVE UNIT W7  
SUNNY ISLES, FL 33160

**New Mailing Address:**

500 BAYVIEW DRIVE UNIT W7  
SUNNY ISLES, FL 33160 US

**FEI Number:** 26-0655129

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PAUL, RAM PRASAD  
1004 BIARRITZ DRIVE APT 102  
MIAMI BEACH, FL 33141 US

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

PAUL, RAM PRASAD  
1004 BIARRITZ DRIVE APT 102  
APT. 102  
MIAMI BEACH, FL 33141 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: RAM PRASAD PAUL

03/12/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: PAUL, RAM PRASAD  
Address: 1004 BIARRITZ DR. APT 102  
City-St-Zip: MIAMI BEACH, FL 33141 US

Title: MGRM  
Name: PAUL, ARCHANA  
Address: 1004 BIARRITZ DR. APT 102  
City-St-Zip: MIAMI BEACH, FL 33141 US

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: RAM PRASAD PAUL

MR.

03/12/2012

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