

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000064727

**Entity Name:** AVARI CAPITAL MANAGEMENT, LLC

**Current Principal Place of Business:**

2762 MEADOWOOD DR  
WESTON, FL 33332

**Current Mailing Address:**

2762 MEADOWOOD DR  
WESTON, FL 33332

**FEI Number:** 45-5283636

**Certificate of Status Desired:** No

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

SALEEM, AFTAB  
2762 MEADOWOOD DR  
WESTON, FL 33332 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name SALEEM, AFTAB  
Address 2762 MEADOWOOD DR  
City-State-Zip: WESTON FL 33332

Title MGRM  
Name SALEEM, ASMA  
Address 2762 MEADOWOOD DR  
City-State-Zip: WESTON FL 33332

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** AFTAB SALEEM

**MANAGING MEMBER**

**04/12/2013**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date