



**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Aug 06, 2007 08:00 AM
Secretary of State

DOCUMENT # L00000010522 1. Entity Name ROYAL MOTEL, LLC			
Principal Place of Business 1526 14TH ST. WEST BRADENTON, FL 34205		Mailing Address 1526 14TH ST. WEST BRADENTON, FL 34205	
DO NOT WRITE IN THIS SPACE			
			
		07092007No Chg-LLC CR2E083 (11/05)	
		4. FEI Number 65-0135884	Applied For Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent FELDMAN, MARC H 3908 26TH STREET WEST BRADENTON, FL 34205		DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$50.00 Due by September 14, 2007			
9. MANAGING MEMBERS/MANAGERS		<p>U000000771470 08/07/07-80003-020 50.00</p> DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PATEL, RAJESH 1526 14TH STREET WEST BRADENTON, FL 34205		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PATEL, BHARTI 1526 14 ST W BRADENTON, FL 34205		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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: <u>Rajesh Patel</u> RAJESH PATEL		7-10-07 941-746-7882	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date Daytime Phone #</small>	