

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008593

Entity Name: M.P.R., LLC

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

701 EAST FLETCHER AVE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

701 EAST FLETCHER AVE
TAMPA, FL 33612

New Mailing Address:

FEI Number: 59-3760467

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MODI, PRAVIN
701 EAST FLETCHER AVE
APT 256
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: JOBALIA, NISHITH
Address: 2314 HILLSBORO BLVD
City-St-Zip: MANCHESTER, TN 37355

Title: MGR () Delete
Name: MODI, PRAVIN
Address: 701 EAST FLETCHER AVE, APT 256
City-St-Zip: TAMPA, FL 33612

Title: MGR () Delete
Name: MODI, BHAVIN
Address: 701 EAST FLETCHER AVE,
City-St-Zip: TAMPA, FL 33612

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: PRAVIN MODI

GM

04/30/2008

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