

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000010080

Entity Name: HANSAR CAPITAL, LC

FILED
Apr 02, 2007
Secretary of State

Current Principal Place of Business:

450 S. ORANGE AVENUE, SUITE 150
ORLANDO, FL 32801

New Principal Place of Business:

255 S. ORANGE AVENUE,
SUITE 960
ORLANDO, FL 32801

Current Mailing Address:

450 S. ORANGE AVENUE, SUITE 150
ORLANDO, FL 32801

New Mailing Address:

255 S. ORANGE AVENUE,
SUITE 960
ORLANDO, FL 32801

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAQVI, HABIB
450 S. ORANGE AVENUE, SUITE 150
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

NAQVI, HABIB
255 S. ORANGE AVENUE,
SUITE 960
ORLANDO, FL 32801 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:

04/02/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR () Delete
Name: NAQVI, HABIB
Address: 450 S ORANGE AVE #150
City-St-Zip: ORLANDO, FL 32801

Title: P () Delete
Name: NAQVI, HABIB
Address: 450 S ORANGE AVE #150
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES:

Title: MGMR (X) Change () Addition
Name: NAQVI, HABIB
Address: 255 S ORANGE AVE #960
City-St-Zip: ORLANDO, FL 32801

Title: P (X) Change () Addition
Name: NAQVI, HABIB
Address: 255 S ORANGE AVE #960
City-St-Zip: ORLANDO, FL 32801

I hereby certify that the information supplied with this filing does not qualify for the 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: HABIB NAQVI

MGR

04/02/2007

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