2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011018

VASSINVESTMENTS,, LL

TAMPA, FL 33647

17314 EMERALD CHASE DR,.

Name:

Address: City-St-Zip:

Entity Name: I - SONALMA, L.L.C.

FILED Jan 21, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: BEST WESTERN SUMMER CREST 5639 OAKLEY BLVD WESLEY CHAPEL, FL 33543 **Current Mailing Address: New Mailing Address:** BEST WESTERN SUMMER CREST 5639 OAKLEY BLVD WESLEY CHAPEL, FL 33543 FEI Number: 59-3729788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ANANT PATEL ANANT PATEL 4538 MAPLETREE LOOP 1550 SALMONBERRY ST. US WESLEY CHAPEL, FL 33543 WESLEY CHAPEL, FL 33543 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: 01/21/2009 Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: MGRM () Delete (X) Change () Addition PATEL, ANANT Name: PATEL, ANANT Name: 4538 MAPLETREE LOOP Address: 1550 SALMONBERRY ST. Address: City-St-Zip: WESLEY CHAPEL, FL 33543 City-St-Zip: WESLEY CHAPEL, FL 33543 Title: MGRM () Delete Title: () Change () Addition PATEL, MAHENDRA Name: Name: Address: 5850 CYPRESS GARDEN BLVD Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PATEL, RAAHUL Name: Name: 5850 CYPRESS GARDEN BLVD Address: Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PATEL, PRAFUL Name: Name: 5850 CYPRESS GARDEN BLVD Address: Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: ANANT PATEL GM 01/21/2009