

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015253

Entity Name: SHRIJI LLC

FILED
Mar 20, 2009
Secretary of State

Current Principal Place of Business:

6900-4 DANIELS PARKWAY
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

6900-4 DANIELS PARKWAY
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 65-1132842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, KETUL
8595 COLLEGE PARK WAY
SUITE # B14
FORT MYERS, FL 33919 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: MGRM () Delete
Name: PATEL, KETUL
Address: 14453 REFLECTION LAKE DR
City-St-Zip: FORT MYERS, FL 33907

Title: MGR () Delete
Name: PATEL, NIRANJAN D
Address: 6900-4 DANIELS ROAD
City-St-Zip: FORT MYERS, FL 33912

Title: MGR () Delete
Name: PATEL, UPENDRA D
Address: 3053 CODY HILL ROAD
City-St-Zip: NASHVILLE, TN 37211

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: PATEL, KETUL
Address: 11263 BLUFF OAK LN
City-St-Zip: FORT MYERS, FL 33912

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: KETUL PATEL

MGRM

03/20/2009

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