

**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Mar 22, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L01000021991**

1. Entity Name  
**L.A. RAMAN, L.L.C.**



Principal Place of Business <b>1945 ARIANA STREET          LAKE LAND, FL 33803</b>	Mailing Address <b>1945 ARIANA STREET          LAKE LAND, FL 33803</b>
---	---

**DO NOT WRITE IN THIS SPACE**



03162004 No Chg-LLC CR2E083 (10/03)

4. FEI Number <b>59-3760670</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00 Additional Fee Required</b>

6. Name and Address of Current Registered Agent

**PATEL, YOGESH  
 1945 ARIANA STREET  
 LAKE LAND, FL 33803**

**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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00  
 Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM PATEL, YOGESH 1945 ARIANA STREET LAKE LAND, FL 33803</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM PATEL, ANILESH 1945 ARIANA STREET LAKE LAND, FL 33803</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000093990  
 03/22/04-80041-009 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:** *D Patel* **3-16-04** **(863) 687-6191**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #