

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000002963

Entity Name: SARRAN, LLC

FILED
May 22, 2006
Secretary of State

Current Principal Place of Business:

14664 KRISTENRIGHT LANE
ORLANDO, FL 32826

New Principal Place of Business:

505 S IVEY LANE
ORLANDO, FL 32811

Current Mailing Address:

14664 KRISTENRIGHT LANE
ORLANDO, FL 32826

New Mailing Address:

FEI Number: 43-1951103 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SARRAN, ASHLY
14664 KRISTENRIGHT LANE
ORLANDO, FL 327806 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SARRAN, ASHLY
Address: 14664 KRISTENRIGHT LN
City-St-Zip: ORLANDO, FL 32826

Title: MGRM () Delete
Name: SARRAN, FRANK
Address: 14664 KRISTENRIGHT LN
City-St-Zip: ORLANDO, FL 32826

Title: MGRM () Delete
Name: SARRAN, ASHLY
Address: 14664 KRISTENRIGHT LANE
City-St-Zip: ORLANDO, FL 32826

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 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: ASHLY SARRAN

MGRM

05/22/2006

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