2006 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT # L02000004136 DOSHI HOLDINGS, LLC

FILED Apr 24, 2006 08:00 AN Secretary of State

Fee Required

Daytime Phone #

Principal Place of Business 560 SOUTH BROADWAY

HICKSVILLE, NY 11801

Mailing Address

560 SOUTH BROADWAY HICKSVILLE, NY 11801



DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

02142006 No Chg-LLC CR2E083 (11/05)

4. FEI Number	··· · · · · · · · · · · · · · · · · ·	Applied For	
01-0743259		Not Applicable	
5. Certificate of Status Des	ired □ \$5	55.00 Additional	

6. Name and Address of Current Registered Agent

KRASNA, GARY ESQ. 3010 NORTH MILITARY TRAIL BOCA RATON, FL 33431

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5. Certificate of Status Desired

	named entity submits this statement for the purpose of changing ions of registered agent.	its registered	d office or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title of applicable 0	NOTE Registered	Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2006			U00000531405 05/06/06-80042-013 50.00
9.	MANAGING MEMBERS/MANAGERS			- 1-1 1-1 1-1 1-1 1-1 1-1 1-1 1-1 1-1 1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DOSHI, NITIN 560 SOUTH BROADWAY HICKSVILLE, NY 11801		<u></u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				ng ni maya kangarang Tay kana a
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS GITY-ST-ZIP			IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			1	
11. I hereby of indicated limited lia	certify that the information supplied with this filing does not quality on this report is true and accurate and that my signature shall holility company or the receiver or trustee empowered to execute	fy for the exe lave the same this report as	mptions contained in Chapter 1 e legal effect as if made under c required by Chapter 608, Florid	19, Florida Statutes, I further certify that the information bath, that I am a managing member or manager of the la Statutes.