2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000013867

Entity Name: PANCHAYAT, LLC

FILED Mar 10, 2004 Secretary of State

Date

2194 HWY. A1A, STE. 201 INDIAN HARBOR BEACH, FL 32937

Current Mailing Address: New Mailing Address:

2194 HWY. A1A, STE. 201 INDIAN HARBOR BEACH, FL 32937

FEI Number: 04-3682323 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SONI, MAHESH 2194 HWY. A1A, STE. 201 INDIAN HARBOR BEACH, FL 32937

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:

City-St-Zip:

Electronic Signature of Registered Agent

MANAGING MEMBERS/MEMBERS:

IHB, FL 32937

ADDITIONS/CHANGES:

City-St-Zip:

IHB, FL 32937

Title:P() DeleteTitle:MGR(X) Change () AdditionName:GADADIA, GOPALName:GADADIA, GOPAL M.D.Address:129 LAUGIUL DR.Address:129 LANSING ISLAND DR

City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

 Title:
 V
 () Delete
 Title:
 MGR
 (X) Change () Addition

 Name:
 SHASHIN, DEEAL M.D
 Name:
 DESAI, SHASHIN M.D

 Address:
 221 LAUSING DR.
 Address:
 221 LANSING ISLAND DR

Title: S () Delete Title: MGR (X) Change () Addition Name: MAUESH, SUAH Name: SHAH, MAHESH

Address: 702 HAWKSBILL DR. Address: 702 HAWKSBILL DR. City-St-Zip: SATELLITE BEACH, FL 32937 City-St-Zip: SATELLITE BEACH, FL 32937

Title: T () Delete Title: MGR (X) Change () Addition Name: SHAITI, RAY Name: SHAH, RAJESH

Name: SHAITI, RAY Name: SHAH, RAJESH
Address: 740 NICKLAUS
City-St-Zip: MELBOURNE, FL 32941 City-St-Zip: MELBOURNE, FL 32941

Title: () Delete Title: MGR () Change (X) Addition

 Name:
 Name:
 SONI, MAHESH

 Address:
 Address:
 2194 HWA A1A #201

 City-St-Zip:
 City-St-Zip:
 IHB, FL 32937

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MAHESH M.SONI MGR 03/10/2004