

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 19, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000014746

1. Entity Name
SARAH HOLDINGS, LLC



Principal Place of Business
**1942 LARGO VISTA BOULEVARD
PALM HARBOR, FL 34685**

Mailing Address
**136 BROADWAY
WOODCLIFF LAKE, NJ 07677**



07062004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
61-1418048

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**JALLO, CHAMOUN
1942 LARGO VISTA BLVD.
PALM HARBOR, FL 34685**

**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 _____

Signature, typed or printed name of registered agent and State if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE **P**
NAME **JALLO, CHAMOUN**
STREET ADDRESS **1942 LARGO VISTA BLVD.**
CITY-ST-ZIP **PALM HARBOR, FL 34685**

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

NONCOMPLIANT
07/19/04-R0017-013 \$0.00

**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)(b), 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 889, Florida Statutes.

SIGNATURE: X

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

7/6/04
Date

201-391-8888
Daytime Phone #