Amended

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

08-19-2004 90001 006 ****50.00
L02000018599

DOCUMENT # L02000018599

1. Entity Name

SARATOGA PLACE LLC

FILED

2004 AUG 23 P 1:12

24080285

MOORE CR2E083 (4/04)

Principal Place of Business	Mailing Address
88-05 MERRICK BOULEVARD, #L3 JAMAICA NY 11432	88-05 MERRICK BOULEVARD, #L3 JAMAICA NY 11432

2. Principal Place of Business	3. Mailing Address
5600 Silver star Rd	5600 Silverstar Rd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO, FL ORIDA	City & State: ORLANDO, FL.
Zip: 32808 Country: USA	Zip: 32808 Country: USA

4. FEI Number: NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SOBHRAJ, HARRY
2917 ASHTON TERRACE
OVIEDO FL 32765

7. Name and Address of New Registered Agent

Name: Harry Sobhraj

Street Address (P.O. Box Number is Not Acceptable): Leasing Office

5600 SILVERSTAR RD

City: ORLANDO FL Zip Code: 32808.

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 7/29/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By September 8, 2004

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SUBRAJ, KEN 88-05 MERRICK BOULEVARD, #L3 JAMAICA NY 11432	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SUBRAJ, GEORGE 8805 MERRICK BLVD JAMAICA NY 11432	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SOBRAJ, JAIRAJ 8805 MERRICK BLVD JAMAICA NY 11432	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SOBHRAJ, STEVE 8805 MERRICK BLVD JAMAICA NY 11432	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SOBHRAJ, HARRY 8805 MERRICK BLVD JAMAICA NY 11432	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ 7/29/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #