2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# L02000020111

Entity Name: AMRIT, LLC

Current Principal Place of Business:

37317 HIGHRIDGE DRIVE
DADE CITY, FL 33525 US

New Principal Place of Business:

11744 FORT KING ROAD
DADE CITY, FL 33525 US

Current Mailing Address:

37317 HIGHRIDGE DRIVE
DADE CITY, FL 33525 US

New Mailing Address:

11744 FORT KING ROAD
DADE CITY, FL 33525 US

FEI Number: 03-0477013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATEL, BALDEV
37317 HIGHRIDGE DRIVE
DADE CITY, FL 33525 US

Name and Address of New Registered Agent:

PATEL, BALDEV
11744 FORT KING ROAD
DADE CITY, FL 33525 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: 04/26/2006
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: PATEL, BALDEV
Address: 37317 HIGHRIDGE DRIVE
City-St-Zip: DADE CITY, FL 33525 US

Title: MGRM ( ) Delete
Name: PATEL, RITA B
Address: 37317 HIGHRIDGE DRIVE
City-St-Zip: DADE CITY, FL 33525 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: PATEL, BALDEV
Address: 11744 FORT KING ROAD
City-St-Zip: DADE CITY, FL 33525 US

Title: MGRM (X) Change ( ) Addition
Name: PATEL, RITA B
Address: 11744 FORT KING ROAD
City-St-Zip: DADE CITY, FL 33525 US

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: BALDEV PATEL MGRM 04/26/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date