

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000007694

**FILED**  
**Apr 30, 2006**  
**Secretary of State**

**Entity Name:** WE INDIANS, LLC

**Current Principal Place of Business:**

3550 W. WATERS AVE  
SUITE 104  
TAMPA, FL 33614

**New Principal Place of Business:**

9908 CHRIS CRAFT COURT  
TAMPA, FL 33615

**Current Mailing Address:**

3550 W. WATERS AVE  
SUITE 104  
TAMPA, FL 33614

**New Mailing Address:**

9908 CHRIS CRAFT COURT  
TAMPA, FL 33615

**FEI Number:** 31-1817237

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ESQUIVEL, JULIO C  
101 EAST KENNEDY BLVD., SUITE 2800  
TAMPA, FL 33602 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: JAIPERSHAD, RONICA R  
Address: 3550 W. WATERS AVENUE  
City-St-Zip: TAMPA, FL 33614

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: JAIPERSHAD, RONICA R  
Address: 9908 CHRIS CRAFT COURT  
City-St-Zip: TAMPA, FL 33615

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: RONICA R JAIPERSHAD

MGR

04/30/2006

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date