2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

ANNUAL REPORT DOCUMENT # L03000014303

1. Entity Name

RAJPUTANA PROPERTY 2, L.C.

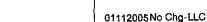


Jan 31, 2005 08:00 AM Secretary of State

Principal Place of Business___

Mailing Address

5110 RUE VENDOME LUTZ, FL 33558 5110 RUE VENDOME LUTZ, FL 33558



CR2E083 (10/03)

FILED

4. FEI Number 56-2349046 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

(352)592-0120

6. Name and Address of Current Registered Agent

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

O'CONNOR, PATRICK M 2240 BELLEAIR ROAD, SUITE 160 CLEARWATER, FL 33764

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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 title 1 applicable. (NOTE Registered Agent signature required when reinstating) DATE			
Filing Fee is \$50.00 Due by May 1, 2005			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SINGH, SUNANDA 5110 RUE VENDOME LUTZ, FL 33558		U00000206825 02/01/05-80021-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN .	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 eath; that I am a managing member or manager of the limited liability company or the receiver or rustee empowered to execute this report as required by Chapter 608, Florida Statutes.			

IG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE