

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 27, 2004 8:00 am
Secretary of State

09-27-2004 90084 002 ****50.00

DOCUMENT # L03000015041

1. Entity Name
SOFTWARE INTEGRATION ARCHITECTS, LLC



Principal Place of Business
19105 STONEBROOK STREET
WESTON, FL 33332

Mailing Address
19105 STONEBROOK STREET
WESTON, FL 33332

14027341



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09182004 Chg-LLC CR2E083 (10/03)

City & State

City & State

4. FEI Number

45-0512819

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MAHANTHI, GANGADHAR
19105 STONEBROOK STREET
WESTON, FL 33332

Name

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

City

FL

Zip Code

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 if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR ☐ Delete
NAME GANGADHAR, MAHANTHI
STREET ADDRESS 19105 STONEBROOK STREET
CITY-ST-ZIP WESTON, FL 33332

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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)(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:

H. Gangadhar

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

09/18/2004 (954) 448-6557

Date

Daytime Phone #

Attachment
#14027341

**SIA, LLC
19105 STINEBROOK STREET
WESTON, FL 33332**

September 18, 2004

Uniform Business Reports
Division of Corporations
P.O. Box 1500
Tallahassee, Florida 32314

To Whom It May Concern:

Ref: SIA, LLC, Document # L03000015041

Enclosed please find the 2004 For Profit Corporation Uniform Business Reports and payments for the following corporations:

We respectfully ask that the Department of State accept the enclosed Uniform Business Reports (UBR's) and attached payments for the 2004 filing fees and waive the additional late filing fee for all of the above mentioned corporations.

I did not receive previous notice. I just received notice of Intent to dissolve. I thought I will be doing business in this corporation but due to unavoidable circumstances I could not do it. I am out town most of the time. I am keeping my corporation active expecting to get back on track in the near future.

Again, this letter serves as a formal request to accept the enclosed UBR's and payments without assessing any additional filing fees. Thank you in advance for your kind cooperation in assisting us to resolve this issue. If you have any questions or comments, please feel free to contact me at 954-448-6557.

Respectfully submitted,

H. Gangadhar
Gangadhar Mahanthi
Enclosures