

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # L03000015162

1. Entity Name
SSA ENTERPRISES, L.L.C.



Principal Place of Business
820 E RT 434
140
LONGWOOD, FL 32836 US

Mailing Address
820 E SR 434
STE# 150
ORLANDO, FL 32750



04252006 No Chg-LLC

CRZE083 (1405)

DO NOT WRITE IN THIS SPACE

4. FEI Number
13-4250902

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SINGH, SURABHI
9228 SOUTHERN BREEZE DR
ORLANDO, FL 32836

**DO NOT WRITE
IN THIS SPACE**

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 true if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

Filing Fee is \$50.00
Due by May 1, 2006

U00000541313
05/10/06-80054-18 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
SINGH, SURABHI S
9228 SOUTHERN BREEZE DR
ORLANDO, FL 32836

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
MADAN, NEENA
8925 ELLIOT CT
ORLANDO, FL 32836

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
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CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

10. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 606, Florida Statutes.

SIGNATURE:

Neene Madan

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

4/25/06 407 331 9888