

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031937

Entity Name: ZAL, LLC

FILED  
Jan 12, 2007  
Secretary of State

## Current Principal Place of Business:

758 N. SUN DRIVE, STE. 104  
LAKE MARY, FL 32476

## New Principal Place of Business:

## Current Mailing Address:

758 N. SUN DRIVE, STE. 104  
LAKE MARY, FL 32476

## New Mailing Address:

FEI Number: 03-0526738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FATEMI, ZIA  
758 N. SUN DRIVE, STE. 104  
LAKE MARY, FL 32476 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: FATEMI, ZIA  
Address: 758 N. SUN DRIVE, STE. 104  
City-St-Zip: LAKE MARY, FL 32476

Title: MGRM ( ) Delete  
Name: ZADEH, FARIDEH A  
Address: 758 N. SUN DRIVE, STE. 104  
City-St-Zip: LAKE MARY, FL 32476

Title: MGRM ( ) Delete  
Name: ARBABZADEH, REZA  
Address: 23 LORRAINE DR., STE. #205  
City-St-Zip: NORTH-YORK, ON M2N 6Z6 CANAD,

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ZIA FATEMI

VP

01/12/2007

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