

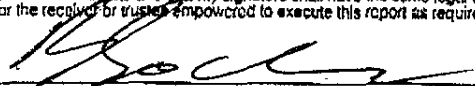
FROM :

FAX NO. : 4078314407

Apr. 26 2005 08:41PM P5

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000033740																																		
1. Entity Name EXECUTIVE PROPERTIES, LLC																																		
Principal Place of Business 1779 EARHART COURT DAYTONA BEACH, FL 32128		Mailing Address 1779 EARHART COURT DAYTONA BEACH, FL 32128																																
DO NOT WRITE IN THIS SPACE																																		
5. Name and Address of Current Registered Agent SODHI, BHUPINDER 1779 EARHART COURT DAYTONA BEACH, FL 32128		 04262005No Chg-LLC CR2E083 (10/03) 4. FEI Number 37-1475145 Applied For Not Applicable 5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required																																
		DO NOT WRITE IN THIS SPACE																																
6. 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 reappointing) DATE _____																																		
Filing Fee is \$50.00 Due by May 1, 2005																																		
9. MANAGING MEMBERS/MANAGERS <table border="1"> <tr> <td>TITLE</td> <td>MGRM</td> </tr> <tr> <td>NAME</td> <td>SODHI, BHUPINDER</td> </tr> <tr> <td>STREET ADDRESS</td> <td>1779 EARHART COURT</td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>DAYTONA BEACH, FL 32128</td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> </tr> <tr> <td>NAME</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> </tr> </table>		TITLE	MGRM	NAME	SODHI, BHUPINDER	STREET ADDRESS	1779 EARHART COURT	CITY-ST-ZIP	DAYTONA BEACH, FL 32128	TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		TITLE		NAME		STREET ADDRESS		CITY-ST-ZIP		UN00000357995 05/04/05-80093-022 50.00 DO NOT WRITE IN THIS SPACE
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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: 		04/26/05 304-9919 Do e Daytime Phone e																																