

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035702

Entity Name: ASRB TECHNOLOGIES, LLC

FILED  
Feb 15, 2006  
Secretary of State

## Current Principal Place of Business:

7100 FAIRWAY DR  
36  
PALM BEACH GARDENS, FL 33418

## New Principal Place of Business:

## Current Mailing Address:

7100 FAIRWAY DR  
36  
PALM BEACH GARDENS, FL 33418

## New Mailing Address:

FEI Number: 20-0237483

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MAWANI, RIZWAN  
1100 - 36 FAIRWAY DR  
PALM BEACH GARDENS, FL 33418 US

## Name and Address of New Registered Agent:

HUSSAIN, ALTAF  
11987 SOUTHERN BLVD  
ROYAL PALM BEACH, FL 33411 US

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: ALTAF HUSSAIN

02/15/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: MAWANI, RIZWAN  
Address: 7100 - 36 FAIRWAY DRIVE  
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM ( ) Delete  
Name: HUSSAIN, ALTAF  
Address: 11987 SOUTHERN BLVD  
City-St-Zip: ROYAL PALM BEACH, FL 33411

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: MITHANI, SAIMA  
Address: 11987 SOUTHERN BLVD  
City-St-Zip: ROYAL PALM BEACH, FL 33411

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: ALTAF HUSSAIN

MGRM

02/15/2006

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