2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039913

Entity Name: OHM JAYRAM HOSPITALITY, LLC

FILED May 14, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

28596 US 19, NORTH CLEARWATÉR, FL 33761

Current Mailing Address: New Mailing Address:

5723 WEST SHORE DR 28596 US 19, NORTH

CLEARWATÉR, FL 33761 NEW PORT RICHEY, FL 33761

FEI Number: 16-1686718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RAMESHCHANDRA, PATEL M EMANDI, VENKATA R 5723 WÉST SHORE DR 28596 US 19 NORTH

NEW PORT RICHEY, FL 34652 US CLEARWATER, FL 33761 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: VENKATA R AO EMANDI 05/14/2008

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

MGRM () Delete

PATEL. RAMESHCHANDRA M Name: 28596 US 19 NORTH Address: City-St-Zip: CLEARWATER, FL 33761

Title: MGRM () Delete

RKD HOSPITALITY GROU, P LLC Name: Address: 5723 WEST SHORE DR

City-St-Zip: NEW PORT RICHEY, FL 34652

Title: () Delete

Name: Address:

City-St-Zip: Title: () Delete

City-St-Zip:

Name: Address:

ADDITIONS/CHANGES:

Title: (X) Change () Addition EMANDI, VENKATA R Name: Address: 5723 WEST SHORE DR

City-St-Zip: NEW PORT RICHEY, FL 34652

Title: MGRM (X) Change () Addition Name: EMANDI, VARALAKSHMI Address: 5723 WEST SHORE DR City-St-Zip: NEW PORT RICHEY, FL 34652

Title: MGRM () Change (X) Addition EMANDI, RANI Name:

Address: 5723 WEST SHORE DR City-St-Zip: NEW PORT RICHEY, FL 34652

() Change (X) Addition Title: MGRM

Name: HIRJI, DANNY

Address: 5723 WEST SHORE DR City-St-Zip: NEW PORT RICHEY, FL 34652

I hereby certify that the information supplied with this filing does not qualify 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: VENKATA RAO EMANDI **MGRM** 05/14/2008