

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000039913

**FILED**  
**Apr 27, 2010**  
**Secretary of State**

**Entity Name:** OHM JAYRAM HOSPITALITY, LLC

**Current Principal Place of Business:**

28596 US 19, NORTH  
CLEARWATER, FL 33761

**New Principal Place of Business:**

**Current Mailing Address:**

5723 WEST SHORE DR  
NEW PORT RICHEY, FL 33761

**New Mailing Address:**

**FEI Number:** 16-1686718

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

EMANDI, VENKATA R  
5723 WEST SHORE DR  
NEW PORT RICHEY, FL 34652 US

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

HIRJI, DANNY  
5723 WEST SHORE DR  
NEW PORT RICHEY, FL 34652 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:** DANNY HIRJI

04/27/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** HIRJI, DANNY  
**Address:** 5723 WEST SHORE DR  
**City-St-Zip:** NEW PORT RICHEY, FL 34652

**Title:** MGRM  
**Name:** EMANDI, RANI  
**Address:** 5723 WEST SHORE DR  
**City-St-Zip:** NEW PORT RICHEY, FL 34652

I hereby 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:** DANNY HIRJI

MGRM

04/27/2010

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