

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000046416

FILED
Jan 15, 2009
Secretary of State

Entity Name: PREMRAJ MARAJ PAINTING L.L.C.

Current Principal Place of Business:

1315 OLYMPIA PARK CIRCLE
OCOE, FL 34761 OR

New Principal Place of Business:

Current Mailing Address:

1315 OLYMPIA PARK CIRCLE
OCOE, FL 34761 OR

New Mailing Address:

FEI Number: 51-0489309

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MARAJ, PREMRAJ
1315 OLYMPIA PARK CIRCLE
OCOE, FL 34761 US

Name and Address of New Registered Agent:

ALL FLORIDA FIRM INC
813 DELTONA BLVD STE A
BOX 134668
DELTONA, FL 32725 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: MARAJ, PREMRAJ

01/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MARAJ, PREMRAJ
Address: 1315 OLYMPIA PARK CIRCLE
City-St-Zip: OCOE, FL 34761 OR

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City-St-Zip: OCOE, FL 34761 OR

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:

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 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: MARAJ, PREMRAJ

MGR

01/15/2009

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