

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000050618

FILED
Jun 24, 2004
Secretary of State

Entity Name: MAULI (USA), L.L.C.

Current Principal Place of Business:

229 DAIRY RD
AUBURNDALE, FL 33823

New Principal Place of Business:

5617 HARRELLS NURSERY ROAD
LAKELAND, FL 33813

Current Mailing Address:

229 DAIRY RD
AUBURNDALE, FL 33823

New Mailing Address:

5617 HARRELLS NURSERY ROAD
LAKELAND, FL 33813

FEI Number: 20-0464582

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TRIVEDI, GIRJASHANKER
229 DAIRY RD
AUBURNDALE, FL 33823

Name and Address of New Registered Agent:

TRIVEDI, GIRJASHANKER
5617 HARRELLS NURSERY ROAD
LAKELAND, FL 33813

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: GIRJASHANKER TRIVEDI

06/24/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: TRIVEDI, GIRJASHANKER
Address: 229 DAIRY RD
City-St-Zip: AUBURNDALE, FL 33823

Title: MGRM () Delete
Name: PATEL, VITTHALBHAI S
Address: 229 DAIRY RD
City-St-Zip: AUBURNDALE, FL 33823

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TRIVEDI, GIRJASHANKER
Address: 5617 HARRELLS NURSERY ROAD
City-St-Zip: LAKELAND, FL 33813

Title: MGRM (X) Change () Addition
Name: TRIVEDI, BIMAL
Address: 5617 HARRELLS NURSERY
City-St-Zip: LAKELAND, FL 33813

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: BIMAL TRIVEDI

MGRM

06/24/2004

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