2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000014314

1. Entity Name
KEERTHI MANAGEMENT, LLC



FILED Jan 31, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

4420 FM 1960 WEST, SUITE 224 HOUSTON, TX 77068 4420 FM 1960 WEST, SUITE 224 HOUSTON, TX 77068

Wellington



01052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0721645

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KEATING, JOHN K 749 NORTH GARLAND AVE., SUITE 101 ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of chathe obligations of registered agent.	anging its registered office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept
SIGNATURE	(NOTE: Registered Agent signature required when reinstaling)	DATE
Filing Fee is \$50.00		

Filing Fee is \$50.00 Due by May 1, 2006

9.	MANAGING MEMBERS/MANAGERS
TRILE NAME STREET ADDRESS CITY-ST-ZIP	MGR YALAMANCHILI, CHOWDARY 4420 FM 1960 WEST, SUITE 224 HOUSTON, TX 77068
Tirle Name Street address City-St-Zip	
TITLE MAME STREET ADDRESS CITY-ST-ZIP	
TITLE HAME STREET ADDRESS CITY-ST-ZIP	
Title Name Street address City-St-Zip	
TITLE NAME STREET AUDRESS CITY-ST-ZIP	portific that the information or position with this still and an and a wife for the

U00000410746 02/09/06-80050-804 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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 609, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #