2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000014874

Entity Name

VIRIND GUPTA REAL ESTATE HOLDINGS, LLC

FILED
Jul 11, 2008 08:00 AM
Secretary of State

Principal Place of Business

4541 BEE RIDGE ROAD SARASOTA, FL 34233 Mailing Address

4541 BEE RIDGE ROAD SARASOTA, FL 34233



07082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number		Applied For
NOT APPLICABLE		Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Rogistered Agent

GUPTA, VIRIND 4541 BEE RIDGE ROAD SARASOTA, FL 34233

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for tions of registered agent.	he purpose of cha	nging its registered office or register	red agent, or both, in the State of	Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable	(NOTE Registered Agent signature required	d when reinstating)	DATE
	E NOW!!! FEE IS \$138.75 by September 12, 2008	In accordantiability com	ce with s. 607.193(2)(b), F.S., the prior no	e limited tice.	
9.	MANAGING MEMBER	S/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DR GUPTA, VIRIND 4541 BEE RIDGE RD SARASOTA, FL 34233				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				9000 07/11/0	000954295 08-80008-007 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT V	WRITE
TITLE NAME STREET ADDRESS City-St-Zip				IN THIS S	PACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

11. I hereby certify that the information supplied with this filing 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 608, Florida Statutes.

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