2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 30, 2007 08:00 AM Secretary of State

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1. Entity Name

TRAFALGAR HOLDINGS, LLC



Principal Place of Business

Mailing Address

790 SUMMA AVENUE WESTBURY, NY 11590 790 SUMMA AVENUE WESTBURY, NY 11590



DO NOT WRITE IN THIS SPACE

04242007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3166900 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

STONE, STEPHEN M 725 NORTH MAGNOLIA AVENUE ORLANDO, FL 32803

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of chaions of registered agent.	anging its registered	d office or registered agent, or bot	th, 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 when reinstating)		DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE	MGRM			
NAME	JAFFER, SADIQUE M			
STREET ADDRESS	790 SUMMA AVENUE			
CITY-ST-ZIP	WESTBURY, NY 11590			
TITLE	M			
NAME	JAFFER, MOHAMMEDTAKI			HOOOOOTATOOA
STREET ADDRESS	1738 BRIDGEWATER DRIVE			U00000745834 -05/16/07-80045-003-50.0
CITY-ST-ZIP	LAKE MARY, FL 32746			03/16/01-80043-003 50.0
TITLE				
NAME				
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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 feceiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE

CITY-ST-ZIP

MANAGING MEMBIX NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

516-997-7197

Daytime Phone #