


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

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

**DOCUMENT # L04000021661**

1. Entity Name  
**SERENGETI PROPERTIES, LLC**



Principal Place of Business <b>790 SUMMA AVENUE          WESTBURY, FL 11590</b>	Mailing Address <b>790 SUMMA AVENUE          WESTBURY, FL 11590</b>
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**DO NOT WRITE IN THIS SPACE**



04242007 No Chg-LLC      CR2E083 (11/05)

4. FEI Number <b>20-3167396</b>	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00</b> 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**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00  
 Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM          JAFFER, SADIQUE M          790 SUMMA AVENUE          WESTBURY, NY 11590</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>M          JAFFER, MOHAMMEDTAKI          1738 BRIDGEWATER DRIVE          LAKE MARY, FL 32746</b>
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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** Sadique Jaffer - Managing Member      4/24/07      516-997-7197

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #

Sadique Jaffer