

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021809

Entity Name: SHAZIA CREAMERY, L.L.C.

FILED  
Mar 21, 2009  
Secretary of State

**Current Principal Place of Business:**

1410 EAST MAIN STREET  
BARTOW, FL 33830

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22334  
LAKE BUENA VISTA, FL 32830

**New Mailing Address:**

1410 EAST MAIN STREET  
BARTOW, FL 33830

FEI Number: 20-2587227

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BATRA, HARISH K  
1410 EAST MAIN STREET  
BARTOW, FL 33830 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: BATRA, SAMEER  
Address: P.O. BOX 22334  
City-St-Zip: LAKE BUENA VISTA, FL 32830 US

Title: MGR ( ) Delete  
Name: BATRA, HARISH K  
Address: P.O. BOX 22334  
City-St-Zip: LAKE BUENA VISTA, FL 32830 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BATRA, SAMEER  
Address: P.O. BOX 24823  
City-St-Zip: LAKELAND, FL 33802 US

Title: MGR (X) Change ( ) Addition  
Name: BATRA, HARISH K  
Address: P.O. BOX 24823  
City-St-Zip: LAKELAND, FL 33802 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: SAMEER BATRA

MGRM

03/21/2009

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