


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 07, 2008 8:00 am**  
**Secretary of State**

04-07-2008 90224 002 \*\*\*138.75

|  |   |   |   |   |  |
|--|---|---|---|---|--|
| <b>DOCUMENT # L04000028530</b><br>1. Entity Name<br><b>ELITE STREET HOLDINGS, LLC</b>  |   |   |   |  |  |
| Principal Place of Business<br><b>151 SOUTHHALL LN<br/>SUITE 240<br/>MAITLAND, FL 32751</b>  |   |   | Mailing Address<br><b>151 SOUTHHALL LN<br/>SUITE 240<br/>MAITLAND, FL 32751</b>   |   |  |
| 2. Principal Place of Business - No P.O. Box #   |   | 3. Mailing Address<br><b>20 N. Orange Avenue</b><br>Suite, Apt. #, etc.<br><b>Suite 600</b><br>City & State<br><b>Orlando, Florida</b><br>Zip<br><b>32801</b> |   |   |  |
| Suite, Apt. #, etc.  |   | City & State  |   |   |  |
| City & State   |   | Zip   |   | Country   |  |
| Country  |   | 4. FEI Number<br><b>57-1203309</b>  |   |   |  |
| 5. Certificate of Status Desired <input type="checkbox"/>  |   | \$5.00 Additional Fee Required  |   |   |  |
| 6. Name and Address of Current Registered Agent<br><b>HENDRY, STONER, CALANDRINO &amp; BROWN, P.A.<br/>20 NORTH ORANGE AVENUE<br/>SUITE 600<br/>ORLANDO, FL 32801</b>  |   |   | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |   |  |
| 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 _____  |   |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$138.75<br/>After May 1, 2008 Fee will be \$538.75</b>  |   | <b>Make check payable to<br/>Florida Department of State</b>  |   |   |  |
| 9. MANAGING MEMBERS/MANAGERS   |   |   | 10. ADDITIONS/CHANGES   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | MGRM<br>RAJAN, ARIF<br>151 SOUTHHALL LN SUITE 240<br>MAITLAND, FL 32751 | <input type="checkbox"/> Delete   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |   |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                          | <input type="checkbox"/> Change <input type="checkbox"/> Addition   |   |   |  |
| 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. |   |   |   |   |  |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> <b>SIGNATURE:</b> _____<br/> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small> </div> <div style="width: 20%; text-align: center;"> <b>3/21/08</b><br/> <small>Date</small> </div> <div style="width: 40%; text-align: right;"> <small>Daytime Phone #</small> </div> </div>   |   |   |   |   |  |