2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000031138

Entity Name

VIRIND GUPTA BUILDING HOLDINGS, LLC



Jul 11, 2008 08:00 AM Secretary of State

Principal Place of Business

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Mailing Address

4541 BEE RIDGE ROAD SARASOTA, FL 34233 4541 BEE RIDGE ROAD SARASOTA, FL 34233



DO NOT WRITE IN THIS SPACE

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	

6. Name and Address of Current Registered Agent

GUPTA, VIRIND D 4541 BEE RIDGE ROAD SARASOTA, FL 34233

NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for ions of registered agent.	the purpose of changing its registere	d office or registered agent, or both, in the Stat	e of Florida. I am familiar with, and accept	
SIGNATURE_					
	Signature, typed or printed name of registered agent as	nd title II applicable. (NOTE Registered	Agent signature required when reinstating)	DATE	
	E NOW!II FEE IS \$138.75 by September 12, 2008	In accordance with s. 607.19 liability company did not rec	93(2)(b), F.S., the limited eive the prior notice.		
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CNY-SY-ZIP	DR. GUPTA, VIRIND 4541 BEE RIDGE ROAD SARASOTA, FL 34233	,	U(07/1	00000954297 1/08-80008-008 138.75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT	WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE					

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:

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

7/8/08

941-371-9355

Daytime Phone #