2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# L04000043473

Entity Name: JAI AMBE LLC

Current Principal Place of Business:

440 8TH AVE W
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

6516 14TH STREET W
BRADENTON, FL 34207 US

New Mailing Address:

FEI Number: 20-1224613 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

PATEL, GIRISH K
6516 14TH STREET W
BRADENTON, FL 34207 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: PATEL, GIRISH K
Address: 6516 14TH ST W
City-St-Zip: BRADENTON, FL 34207 US

Title: MGR ( ) Delete
Name: PATEL, ANANTKUMAR R
Address: 5683 EASTWIND DR
City-St-Zip: SARASOTA, FL 34233 US

Title: MGRM ( ) Delete
Name: SHAH, PRAKASH J
Address: 644 67TH ST CIR E
City-St-Zip: BRADENTON, FL 34208 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: GIRISH K PATEL MGRM 05/01/2006

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