

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000046495

Entity Name: B.M.L. LLC

FILED
Jul 04, 2008
Secretary of State

Current Principal Place of Business:

1510 GLENWICK DR.
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

1510 GLENWICK DR.
WINDERMERE, FL 34786

New Mailing Address:

FEI Number: 04-3795416 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BHARTI, LALWANI
1510 GLENWICK DR.
WINDERMERE, FL 34786 US

Name and Address of New Registered Agent:

PRAKASH, LALWANI
1510 GLENWICK DR.
WINDERMERE, FL 34786 US

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: PRAKASH LALWANI

07/04/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LALWANI, MOTIRAM A
Address: 1510 GLENWICK DR.
City-St-Zip: WINDERMERE, FL 34786

Title: MGR () Delete
Name: LALWANI, PRAKASH
Address: 1510 GLENWICK DR.
City-St-Zip: WINDERMERE, FL 34786

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: LALWANI, BHARTI
Address: 1510 GLENWICK DR.
City-St-Zip: WINDERMERE, FL 34786

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: PRAKASH LALWANI

MGRM

07/04/2008

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