

# **2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000084759

**FILED**  
**Aug 25, 2005**  
**Secretary of State**

**Entity Name:** XL TECHNOLOGY CONSULTING, LLC

**Current Principal Place of Business:**

1675 EE WILLIAMSON RD  
LONGWOOD, FL 32779 US

**New Principal Place of Business:**

**Current Mailing Address:**

2208 FOX QUARRY LANE  
SANFORD, FL 32773 US

**New Mailing Address:**

1675 EE WILLIAMSON RD  
LONGWOOD, FL 32779 US

**FEI Number:** 20-1920448 **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:**

JAFFER, SAJJAD  
2208 FOX QUARRY LANE  
SANFORD, FL 32773 US

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

JAFFER, SAJJAD  
102 MORRISON AVENUE  
SANFORD, FL 32773 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:

08/25/2005

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PIRMOHAMED, MOHAMEDRAFIQ  
Address: 619 TABOR PLACE  
City-St-Zip: EAST MEADOW, NY 11554 US

**ADDITIONS/CHANGES:**

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 Section 119.07(3)(i), 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: MOHAMEDRAFIQ PIRMOHAMED

MGRM

08/25/2005

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