

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000087095

Entity Name: SURYA LLC

FILED  
Apr 17, 2007  
Secretary of State

## Current Principal Place of Business:

10257 SANDY MARSH CIRCLE  
ORLANDO, FL 32832

## New Principal Place of Business:

13251 MCGREGOR BLVD  
SUITE 111-1  
FORY MYERS, FL 33919

## Current Mailing Address:

10257 SANDY MARSH CIRCLE  
ORLANDO, FL 32832

## New Mailing Address:

FEI Number: 20-1950225

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, MANDAKINI  
10257 SANDY MARSH CIRCLE  
ORLANDO, FL 32832 US

## Name and Address of New Registered Agent:

PATEL, YOGESH  
10257 SANDY MARSH CIRCLE  
ORLANDO, FL 32832 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: YOGESH PATEL

04/17/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PATEL, YOGESH  
Address: 10257 SANDY MARSH CIRCLE  
City-St-Zip: ORLANDO, FL 32832

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: RAI, MANISH  
Address: 6608 PLANTATION PRESERVE CIRCLE  
City-St-Zip: FORT MYERS, FL 33966

Title: MGRM ( ) Change (X) Addition  
Name: PATEL, YOGESH  
Address: 10257 SANDY MARSH CIRCLE  
City-St-Zip: ORLANDO, FL 32832

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: YOGESH PATEL

MGRM

04/17/2007

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