

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026537

FILED
Jan 11, 2008
Secretary of State

Entity Name: THE MAJESTIC PEOPLE, LLC

Current Principal Place of Business:

6817 SOUTHPOINT PARKWAY
SUITE #2104
JACKSONVILLE, FL 32216 US

New Principal Place of Business:

Current Mailing Address:

6817 SOUTHPOINT PARKWAY
SUITE #2104
JACKSONVILLE, FL 32216 US

New Mailing Address:

FEI Number: 20-4110304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VENKATESAN, ARUN
6817 SOUTHPOINT PARKWAY
SUITE #2104
JACKSONVILLE, FL 32216 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: VENKATESAN, ARUN
Address: 2422 COACHMAN LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MGRM () Delete
Name: VENKATESAN, ANAND
Address: 2422 COACHMAN LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: MGRM () Delete
Name: VIJAYAKUMAR, MANIMALA
Address: 2422 COACHMAN LAKES DRIVE
City-St-Zip: JACKSONVILLE, FL 32246 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 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: ARUN VENKATESAN

MR

01/11/2008

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