



2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2008 8:00 am
Secretary of State

04-07-2008 90232 006 ***138.75

DOCUMENT # L05000039403 1. Entity Name RANAZ, LLC					
Principal Place of Business 10857 CROSS CREEK BLVD. TAMPA, FL 33647 US			Mailing Address 1121 EVENING TRAIL DR. WESLEY CHAPEL, FL 33543 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 10857 Crosscreek Blvd			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Tampa FL			
City & State		City & State			
Zip 33647	Country	Zip 33647	Country		
4. FEI Number 20-2715123				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent SARSOUR, GHAZI H 1121 EVENING TRAIL DR. WESLEY CHAPEL, FL 33543			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 10857 Crosscreek Blvd. Tampa City FL Zip Code 33647		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SARSOUR, GHAZI H 1121 EVENING TRAIL DR. WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	10857 Crosscreek Blvd. Tampa, FL 33647
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SARSOUR, EZDEHAR 1121 EVENING TRAIL DR. WESLEY CHAPEL, FL 33543	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	10857 Crosscreek Blvd. Tampa, FL 33647
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>Ghazi H. Sarsour</u> Date: <u>April 3, 08</u>					