

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053438

FILED
Sep 05, 2006
Secretary of State

Entity Name: ROTA LLC

Current Principal Place of Business:

16850-112 COLLINS AVE
SUNNY ISLESW BEACH, FL 33160 US

New Principal Place of Business:

259 CAMBRIDGE DRIVE
RAMSEY, NJ 07446 US

Current Mailing Address:

259 CAMBRIDGE RD
RAMSEY, NJ 07024 US

New Mailing Address:

259 CAMBRIDGE DRIVE
RAMSEY, NJ 07446 US

FEI Number: 20-3217459 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:

Name and Address of New Registered Agent:

FLORIDA INCORPORATOR
2730 WHITE SANDS DRIVE
SUITE 3-A
SARASOTA, FL 34231 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: _____

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CHTCHERBAKOVA, ALEXANDRA
Address: 170 HENSHAW AVE
City-St-Zip: SPRINGFIELD, NJ 07081 US

Title: MGRM () Delete
Name: KENIU, MARIA
Address: 259 CAMBRIDGE DR
City-St-Zip: RAMSEY, NJ 07446 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CHTCHERBAKOVA, ALEXANDRA
Address: 259 CAMBRIDGE DRIVE
City-St-Zip: RAMSEY, NJ 07446 US

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 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: MARIA KENIU

MGRM

09/05/2006

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