

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053667

Entity Name: SARDAN, LLC

FILED
Jan 25, 2009
Secretary of State

Current Principal Place of Business:

5 PINE VALLEY WAY
FLORHAM PARK, NJ 07932

New Principal Place of Business:

331 SE 9TH LANE, MIZNER LAKE ESTATES
BOCA RATON, FL 33432

Current Mailing Address:

5 PINE VALLEY WAY
FLORHAM PARK, NJ 07932

New Mailing Address:

331 SE 9TH LANE, MIZNER LAKE ESTATES
BOCA RATON, FL 33432

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JEFFREY A. DEUTCH, P.A.
7777 GLADES ROAD STE 300
BOCA RATON, FL 33434 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: HASSAN, FRED
Address: 5 PINE VALLEY WAY
City-St-Zip: FLORHAM PARK, NJ 07932

Title: MGRM () Delete
Name: HASSAN, NOREEN
Address: 5 PINE VALLEY WAY
City-St-Zip: FLORHAM PARK, NJ 07932

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HASSAN, FRED
Address: 331 SE 9TH LANE, MIZNER LAKE ESTATES
City-St-Zip: BOCA RATON, FL 33432

Title: MGRM (X) Change () Addition
Name: HASSAN, NOREEN
Address: 332 SE 9TH LANE, MIZNER LAKE ESTATES
City-St-Zip: BOCA RATON, FL 33432

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: NOREEN HASSAN

MRS.

01/25/2009

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