2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000053694

1. Entity Name GRAF, LLC.



FILED Apr 13, 2006 8:00 am Secretary of State 04-13-2006 90043 006 ****50.00

Principal Place of Business 2015 S. FEDERAL HIGHWAY BOYNTON BEACH, FL 33435	Mailing Address 2015 S. FEDERAL HIGHWAY BOYNTON BEACH, FL 33435	

BOYNTON BEACH, FL 33435 BOYNTON BEACH, FL 33435				1 100 110 110 110	:	1 12/8/ 2 11				
2. Principal Pl	lace of Business	Business 3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03092006	Chg-LLC	CR2E0	83 (11/05)		
City & State			City & State			4. FEI Numb	er 25163	26_		olied For Applicable
Zip		Country	Zip Country				of Status Desired	П	\$5.00 Addi Fee Required	
	6. Name an	d Address of Current F	Registered Agent			7. Name and	Address of New R	egistered /	Agent	
MICHAEL H. WOLF & ASSOCIATES, LLC. 3832 NORTH UNIVERSITY DRIVE SUNRISE, FL 33351				. Name						
				Street Address (P.O. Box Number is Not Acceptable)						
			-	_	City			FL	Zip Code	
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 .	Signature, typed or p	orinted name of registered agent a	nd title if applicable. (NOT	E: Registered	Agent signature requ	uired when reinstating)		DATE		
Filing Fee is \$50.00 Due by May 1, 2006							Florida		ent of State	
9.		MANAGING MEMBER	RS/MANAGERS	10.			ADDITIONS/	CHANGES	·····	C Addition
TITLE	MGR		☐ Delete	TITLE	Į.				☐ Change	☐ Addition
NAME	IYER, RAJE			NAMI						
STREET ADDRESS		ANAN DRIVE		4	ET ADDRESS -ST-ZIP					
CITY-ST-ZIP	 	LE, TN 37042							☐ Change	Addition
TITLE	MGRM	1110	☐ Delete	TITLE		i			L Change	□ veguuon i
NAME	FAVORITE,	INC. ES CREEK PIKE			ET ADDRESS	1				
STREET ADDRESS CITY-ST-ZIP	JOELTON, 1				-ST-ZIP	,				
	MGRM	====	Delete	TITLE					Change	Addition
TITLE	WADHWA,	ANII	C. Delete	NAM		•				
STREET ADDRESS	1	ROOK DRIVE		STRE	ET ADDRESS					
CITY-ST-ZIP		LE, TN 37043		CITY	-ST-ZIP					
TITLE	MGRM		☐ Delete	TITLE					Change	Addition
NAME	ADVANI, GL	JRMIT		NAM	Ε					
STREET ADDRESS	2802 APPA	CHE MOON DRIVE			ET AODRESS					
CITY-ST-ZIP	MURFREES	BORO, TN 37130		CITY	-ST-ZIP					
TITLE			☐ Delete	TITL	L				☐ Change	Addition
NAME				NAM	i i					
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				CITY	-ST-ZIP					M Addition
TITLE			☐ Delete	TITU	•				☐ Change	Addition
NAME				NAM	i i					
STREET ADDRESS					ET ADDRESS -ST-ZIP					
CITY-ST-ZIP		F 27	this filing does not qualify for			ned in Chanter 119	Florida Statutes I f	urther certif	y that the info	rmation
! 11. Thereby	certify that the ii	กางrmation supplied with	i mis ming does not quanty to	OF LINE BYE	mpuona contail	if made under en	the that I am a mana	aina memb	er or manage	r of the

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 ar imited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

(RAJESH IYER)

04/19/06 561-789-2923