

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000066519

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: SHAV INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

1097 SHOTGUN RD  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

1097 SHOTGUN RD  
SUNRISE, FL 33326

**New Mailing Address:**

P O BOX 268030  
WESTON, FL 33326

FEI Number: 20-8489492

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROOPCHAND, SOOKRANIE  
1097 SHOTGUN RD  
SUNRISE, FL 33326 US

**Name and Address of New Registered Agent:**

ROOPCHAND, HEMRAJ  
1097 SHOTGUN RD  
SUNRISE, FL 33326 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: HEMRAJ ROOPCHAND

04/29/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: ROOPCHAND, SOOKRANIE  
Address: 1097 SHOTGUN RD  
City-St-Zip: SUNRISE, FL 33326

Title: MGRM ( ) Delete  
Name: ROOPCHAND, HEMRAJ  
Address: 1097 SHOTGUN RD  
City-St-Zip: SUNRSIE, FL 33326

**ADDITIONS/CHANGES:**

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: HEMRAJ ROOPCHAND

MMG

04/29/2009

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