

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000070061

**FILED**  
**Feb 21, 2011**  
**Secretary of State**

**Entity Name:** S. A. SIDDIQUI ENTERPRISES LLC

**Current Principal Place of Business:**

3840 BELFORT ROAD  
SUITE 302  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

3840 BELFORT ROAD  
SUITE 302 BOX 10  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

PO BOX 442067  
JACKSONVILLE, FL 32222

**New Mailing Address:**

3840 BELFORT ROAD  
SUITE 302 BOX 10  
JACKSONVILLE, FL 32216

**FEI Number:** 51-0551414

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HILL, KAYLEIGH W  
10745 OLD KINGS ROAD  
JACKSONVILLE, FL 32219 US

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

FRIDAY, ERIC J  
541 EAST MONROE STREET  
JACKSONVILLE, FL 32202 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: ERIC J. FRIDAY

02/21/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: SIDDIQUI, S A ESQ.  
Address: 3840 BELFORT ROAD (SUITE 302) BOX 10  
City-St-Zip: JACKSONVILLE, FL 32216 US

I hereby 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: S. A. SIDDIQUI, ESQ

MGRM

02/21/2011

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