2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT #L05000082121



FILED Mar 31, 2006 8:00 am Secretary of State

1. Entity Nam MAHBUB	ne BANI SEVEN (OAKS LLC						0	3-31-20	06 90	182 01	4 ****55	.00
Principal Place of Business 6418 BRIGHT BAY COURT APOLLO BEACH, FL 33572			Mailing Address 6418 BRIGHT BAY COURT APOLLO BEACH, FL 33572										
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite Apt # etc							5 4 111 6 6 111	101111101101	1881 11219 1122)	4808) (K 120)
			Suite, Apt. #, etc.				032220	006	Chg-LLC		CR2E	083 (11/05	·
City & State			City & State				4. FEI N	umber	4-1-6	218	3413	າຕ⊢+	Applied For Not Applicable
Zip	Country		Zip Coun		try	5. Certifica			ate of Status Desired \$5.00 Additional Fee Required				
	6. Name and A	Address of Current R	egistered Agent				7. Name	and Ac	idress of	New Re	gistered		
			<u> </u>		Name		·· •·· ·· ·						
6418 BRIG	ANI, DEEPAK F SHT BAY COU	RT		Street A	ddress (F	P.O. Box N	lumber is	s Not Acce	eptable)	· · · · · · · · · · · · · · · · · · ·			
APOLLO E	BEACH, FL 33	5/2										••	
					City						FL	Zip Co	de
			the purpose of changing its	registere	d office o	r registere	ed agent, o	or both,	in the State	e of Flor		familiar with	n, and accept
the obligat	tions of registered a	agent. TOO 1	. 1 1							_	12	1	
0.00		1644	$N \lambda \alpha_1 \lambda \alpha_2 \lambda$								ושפומ	106	
SIGNATURE.	Signature, based or printe	en translational de amount	d title if excitosible (NOT	E: Decisteres	1 Apent rignet	ure required	when reinstatio	-m/			DATE	+	
SIGNATURE.	Signature, typed or printe	d name of registered alrent an	d title if applicable. (NOTI	E: Registere	d Agent signat	ura required	when reinstatin	ng)		· -	DATE	1	
FI	Signature, typed or printe lling Fee is \$5 ue by May 1, 2	0.00	of title if applicable. (NOTI	E: Registere	d Agent signat	ure required	when reinstatin	ns)	F		check	payable to nent of Sta	nte
FI	iling Fee is \$5 ue by May 1, 2	0.00		E: Registered	d Agent signat	Deviuper eru	when reinstatin	ng)		lorida	check	payable to nent of Sta	ite
9.	iling Fee is \$5 ue by May 1, 2	0.00		10.		MGF	2M		ADDIT	IONS/	check Departn	payable to nent of Sta	ate Addition
9. TITLE NAME	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS	10. TITLE NAMI		MGA DE	2M EPAK	R	ADDIT	IONS/	check Departm	payable to nent of Sta	
9.	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS	10. Title Nami Stre		MGA DE 64	ZM EPAK 18 B	R R R R	ADDIT	IONS/	CHANGES	payable to nent of Sta	
9. TITLE NAME STREET ADDRESS	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS	10. Title Nami Stre	E ET ADDRESS -ST-ZIP	MGF DE 64 API	ZM EPAK 18 Bi	R RIGI	ADDIT	IAH	CHANGES BUB CT.	payable to nent of Sta	√ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete	10. TITLE NAMN STRE CITY TITLE	E ET ADDRESS - ST- ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT AT B EACH	IONS/ONS/ONS/ONS/ONS/ONS/ONS/ONS/ONS/ONS/	CHANGES BUB CT. BAN	payable to nent of Sta	√ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete	10. TITLE NAMN STRE CITY TITLE NAMN STRE	E ET ADDRESS -S1-ZIP : : E ET ADDRESS	MGF DE 64 API MGF LYN	EPAK 18 BI DLLO RM	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT AT B EACH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete	10. TITLE NAMN STRE CITY TITLE NAMN STRE	E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE TITLE TITLE TITLE TITLE TITLE TITLE TITLE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI	E ET ADDRESS -ST-ZIP E E T ADDRESS -ST-ZIP E E E E T ADDRESS -ST-ZIP E E E T ADDRESS	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete Delete	10. TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE CITY TITLE NAMI STRE	E ET ADDRESS -ST-ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete	10. TITLE NAMI STRE CITY	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E T ADDRESS -ST-ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete Delete	10. TITLE NAMI STRE CITY	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	iling Fee is \$5 ue by May 1, 2	0.00	S/MANAGERS Delete Delete Delete	10. TITLE NAMI STRE CITY	E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP	MGF DE 64 API MGF LYN	EPAK DLLO 2M	R RIGI BE	ADDIT HT B EACH MAH	HBU BI	CHANGES BUB CT. BAN	payable to nent of Sta	Addition Addition Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information 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 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.

NAME

STREET ADDRESS CITY-ST-ZIP

NAME

STREET ADDRESS