

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096280

FILED  
Feb 07, 2008  
Secretary of State

Entity Name: DOOR-TO-DOOR INVESTORS, LLC.

## Current Principal Place of Business:

5359 NW 124TH WAY  
CORAL SPRINGS, FL 33076

## New Principal Place of Business:

2560 NW 124TH AVE  
CORAL SPRINGS, FL 33065

## Current Mailing Address:

5359 NW 124TH WAY  
CORAL SPRINGS, FL 33076

## New Mailing Address:

2560 NW 124TH AVE  
CORAL SPRINGS, FL 33065

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BAIG, JAWAD  
5359 NW 124TH WAY  
CORAL SPRINGS, FL 33076 US

## Name and Address of New Registered Agent:

WAJID, ARIF  
2560 NW 124TH AVE  
CORAL SPRINGS, FL 33065 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: ARIF WAJID

02/07/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: BAIG, JAWAD  
Address: 5359 NW 124TH WAY  
City-St-Zip: CORAL SPRINGS, FL 33076

Title: MGR (X) Delete  
Name: WAJID, ARIF  
Address: 2560 NW 124TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33065

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: WAJID, ARIF  
Address: 2560 NW 124TH AVE  
City-St-Zip: CORAL SPRINGS, FL 33065

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: ARIF WAJID

MGR

02/07/2008

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