

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096469

FILED  
Apr 30, 2011  
Secretary of State

Entity Name: SHRI, LLC

**Current Principal Place of Business:**

1500 W CYPRESS CREEK RD  
#409  
FORT LAUDERDALE, FL 33309

**New Principal Place of Business:**

**Current Mailing Address:**

1500 W CYPRESS CREEK RD  
#409  
FORT LAUDERDALE, FL 33309

**New Mailing Address:**

FEI Number: 81-0679718      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

SAWLANI, AVINASH S  
1500 W CYPRESS CREEK RD  
SUITE 409  
FORT LAUDERDALE, FL 33309 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: SAWLANI, SURESH R  
Address: 1500 W CYPRESS CREEK RD #409  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGMR  
Name: SAWLANI, AVINASH S  
Address: 1500 W CYPRESS CREEK RD #409  
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: MGR  
Name: SAWLANI, PUJA  
Address: 1500 W CYPRESS CREEK RD #409  
City-St-Zip: FORT LAUDERDALE, FL 33309

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: AVINASH S. SAWLANI      MGMR      04/30/2011

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