

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000105344

FILED
Aug 22, 2007
Secretary of State

Entity Name: JAISH LIMITED LIABILITY COMPANY

Current Principal Place of Business:

104 NW 100TH AVE
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

104 NW 100TH AVE
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 20-3631955 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 US

Name and Address of New Registered Agent:

SEAN, KANOV
15220 SW 74TH PLACE
MIAMI, FL 33157 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: SEAN KANOV

08/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KHAKHRIA, MILAN
Address: 104 NW 100TH AVE
City-St-Zip: PLANTATION, FL 33324

Title: MGRM () Delete
Name: KHAKHRIA, PRITI
Address: 104 NW 100TH AVE
City-St-Zip: PLANTATION, FL 33324

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: MILAN KHAKHRIA

DR

08/22/2007

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