## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Feb 28, 2007 8:00 am Secretary of State

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DOCUMENT # L0600001504  1. Entity Name AMBIKA, LLC							02-08-20	007 9013	8 003 **	·**50.00
Principal Place	of Business		Mailing Address							
3516 PAR ROAD			3516 PAR ROAD			_				
SEBRING, FL	33872-12	25	SEBRING, FL 33872-1225			1	• • •			
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2. Principal Place of Business - No P.O. Box #			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. W. etc.			01172007	Chg-LLC	CR2E0	983 (12/06)	
City & State			City & State			4. FEI Numi	20-40	684	.711	oplied For ot Applicable
Zip	Country		Zip Count		ntry	5. Certificate of Status Desired S5.00 Additional Fee Required				
6. Name and Address of Current R						7. Name and Address of New Registered Agent				
					Name					
BRENNAN, MANNA & DIAMOND, P.L. 76 SOUTH LAURA STREET, STE. 2110 JACKSONVILLE, FL. 32202			Street Add			s (P.O. Box Number is Not Acceptable)				
,										
		•			City			FL	Zip Cod	e
8 The shows	named entit	weatherite this statement for	ed attice or register	red agent or b	oth in the State of F		lamiliar with	and accept		
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. I am familiar with, and accept the obligations of registered agent.										
SIGNATURE										
Signature, typed or printed name of registered agers and title if applicable (NOTE Registered Agent signature required when rematating)  OATE										
		ls \$50.00 y 1, 2007				Make check payable to Florida Department of State				
9.•		MANAGING MEMBE	S/MANAGERS 10.				ADDITIONS	/CHANGES		
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11. I hereby certify that the information supplied with this filling 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.										
SIGNATURE:										
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