

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011422

FILED
Mar 31, 2009
Secretary of State

Entity Name: MEHTA FAMILY MANAGEMENT, LLC

Current Principal Place of Business:

10629 BOCA POINTE DR
ORLANDO, FL 32836 US

New Principal Place of Business:

Current Mailing Address:

10629 BOCA POINTE DR
ORLANDO, FL 32836 US

New Mailing Address:

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

Name and Address of Current Registered Agent:

LASMAN LAW FIRM, P.A.
6125 DELANCEY STATION STREET
SUITE 205
RIVERVIEW, FL 33569 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: MGRM () Delete
Name: MEHTA, JITENDRA
Address: 10629 BOCA POINTE DR
City-St-Zip: ORLANDO, FL 32836 US

Title: MGRM () Delete
Name: MEHTA, ILLA
Address: 10629 BOCA POINTE DR
City-St-Zip: ORLANDO, FL 32836 US

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: JITENDRA MEHTA

MGRM

03/31/2009

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