

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037979

FILED  
Jul 02, 2007  
Secretary of State

Entity Name: BILLED RIGHT LLC.

## Current Principal Place of Business:

106 W. MITCHELL-HAMMOCK ROAD  
OVIEDO, FL 32765

## New Principal Place of Business:

253 LIVE OAK BLVD  
CASSELBERRY, FL 32707

## Current Mailing Address:

106 W. MITCHELL-HAMMOCK ROAD  
OVIEDO, FL 32765

## New Mailing Address:

253 LIVE OAK BLVD  
CASSELBERRY, FL 32707

FEI Number: 74-3173254      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:

PATEL, SAURIN  
1259 MARINA POINT.  
APT # 305  
CASSELBERRY, FL 32707 US

## Name and Address of New Registered Agent:

PATEL, SAURIN  
253 LIVE OAK BLVD  
APT # 305  
CASSELBERRY, FL 32707 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: SAURIN PATEL

07/02/2007

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: PATEL, SAURIN  
Address: 1259 MARINA POINT  
City-St-Zip: APT # 305, FL 32707 US

Title: MGR ( ) Delete  
Name: PATEL, GAURANG D  
Address: 5824 MARIPOSA COVE LN  
City-St-Zip: ORLANDO, FL 32822 US

Title: MGR ( ) Delete  
Name: KUNDLAS, MANJIT  
Address: 1143 STATE ROAD 60 E,  
City-St-Zip: LAKE WALES, FL 33853 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: PATEL, SAURIN  
Address: 2000 MANHATTAN LN  
City-St-Zip: CASSELBERRY, FL 32707 US

Title: MGR (X) Change ( ) Addition  
Name: PATEL, GAURANG D  
Address: 5824 MARIPOSA COVE LN  
City-St-Zip: ORLANDO, FL 32707 US

Title: MGR (X) Change ( ) Addition  
Name: KUNDLAS, MANJIT  
Address: 1143 STATE ROAD 60 E,  
City-St-Zip: LAKE WALES, FL 32707 US

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: SAURIN PATEL

MGR

07/02/2007

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