

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000051704

Entity Name: MAJA, LLC

**FILED**  
**Jan 09, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

64 WASHINGTON ST.  
APT. A  
ST.AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

**Current Mailing Address:**

132 MORNINGVIEW PL  
ST.AUGUSTINE, FL 32086 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

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

HOBOR, ISTVAN  
64 WASHINGTON STR  
APT. A  
ST.AUGUSTINE, FL 32084 US

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

CSABA, HAMORSZKI  
246 DELTONA BLVD  
SAINT AUGUSTINE, FL 32086 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: CSABA HAMORSZKI

01/09/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: P  
Name: MAIER, JANOS  
Address: 132 MORNINGVIEW PL  
City-St-Zip: ST.AUGUSTINE, FL 32086 US

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: JANOS MAIER

P

01/09/2011

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