

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000062301

FILED
Aug 11, 2008
Secretary of State

Entity Name: ROYAL PALM BUSINESS MANAGEMENT, LLC

Current Principal Place of Business:

2316 PINE RIDGE ROAD
457
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

2316 PINE RIDGE ROAD
457
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 56-2379599 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

KHILALOVA, MADINA B
2316 PINE RIDGE ROAD
457
NAPLES, FL 34109 US

Name and Address of New Registered Agent:

OBIDOV, AZIZ B
2316 PINE RIDGE ROAD
457
NAPLES, FL 34109 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: AZIZ OBIDOV

08/11/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: OBIDOV, AZIZ I
Address: 2316 PINE RIDGE ROAD 457
City-St-Zip: NAPLES, FL 34109 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: KHILALOVA, MADINA I
Address: 2316 PINE RIDGE ROAD 457
City-St-Zip: NAPLES, FL 34109 US

Title: MGR () Change (X) Addition
Name: OBIDOV, AZIZ
Address: 2316 PINE RIDGE ROAD, UNIT 457
City-St-Zip: NAPLES, FL 34109

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: AZIZ OBIDOV

MGR

08/11/2008

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