2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 13, 2007
Secretary of State

DOCUMENT# L06000074961

Entity Name: DR. KISTAMA NAIDU, LLC

Current Principal Place of Business:

16109 OPAL CREEK DRIVE
WESTIN, FL 33331

New Principal Place of Business:

Current Mailing Address:

16109 OPAL CREEK DRIVE
WESTIN, FL 33331

New Mailing Address:

16109 OPAL CREEK DRIVE
WESTON, FL 33331

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **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:

NAIDU, KISTAMA DR
16109 OPAL CREEK DRIVE
WESTIN, FL 33331 US

Name and Address of New Registered Agent:

NAIDU, KISTAMA DR
16109 OPAL CREEK DRIVE
WESTON, FL 33331 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: KISTAMA NAIDU 09/13/2007
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: NAIDU, KISTAMA
Address: 16109 OPAL CREEK DRIVE
City-St-Zip: WESTIN, FL 33331

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: NAIDU, KISTAMA
Address: 16109 OPAL CREEK DRIVE
City-St-Zip: WESTON, FL 33331

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: KISTAMA NAIDU MGR 09/13/2007
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date