

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094812

Entity Name: VEI SYSTEMS, LLC

FILED
May 20, 2008
Secretary of State

Current Principal Place of Business:

8927 HYPOLUXO RD.
SUITE A4141
LAKE WORTH, FL 33467 US

Current Mailing Address:

8927 HYPOLUXO RD.
SUITE A4141
LAKE WORTH, FL 33467 US

New Principal Place of Business:

8983 OKEECHOBEE BLVD.
SUITE 202-111
WEST PALM BEACH, FL 33411 US

New Mailing Address:

8983 OKEECHOBEE BLVD.
SUITE 202-111
WEST PALM BEACH, FL 33411 US

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:

NARWANI, ANIL V
8927 HYPOLUXO RD.
A4-141
LAKE WORTH, FL 33467 US

Name and Address of New Registered Agent:

NARWANI, ANIL V
8983 OKEECHOBEE BLVD.
SUITE 202-111
WEST PALM BEACH, FL 33411 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:

05/20/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MR. () Delete
Name: NARWANI, ANIL
Address: 8927 HYPOLUXO RD., A4-141
City-St-Zip: LAKE WORTH, FL 33467

ADDITIONS/CHANGES:

Title: MR. (X) Change () Addition
Name: NARWANI, ANIL
Address: 8983 OKEECHOBEE BLVD., SUITE 202-111
City-St-Zip: WEST PALM BEACH, FL 33411

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: ANIL NARWANI

MR.

05/20/2008

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