## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000096813

JENKINS, MICHAEL E

5550 BAFFIN CIRCLE

SPRING HILL, FL 34606 US

Name:

Address:

City-St-Zip:

Entity Name: PARRA & KARIMI ENGINEERING, LLC

FILED Jan 02, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3019 BANYAN HILL LANE 9252 NORTH 56TH STREET LAND O' LAKES, FL 34639 US TEMPLE TERRACE, FL 33617 US **Current Mailing Address: New Mailing Address:** 3019 BANYAN HILL LANE 9252 NORTH 56TH STREET LAND O' LAKES, FL 34639 US TEMPLE TERRACE, FL 33617 US FEI Number: 22-3943908 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PARRA, MARIO A 3019 BANYAN HILL LANE LAND O' LAKES, FL 34639 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete PARRA, MARIO A Name: Name: 3019 BANYAN HILL LANE Address: Address: City-St-Zip: LAND O' LAKES, FL 34639 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition KARIMI, HOUSHANG Name: Name: Address: 25218 BUNTING CIRCLE Address: City-St-Zip: LAND O' LAKES, FL 34639 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change ( ) Addition TAYEBI, AMROLLAH JENKINS, MICHAEL E Name: Name: 11106 LAKE SASSA DRIVE Address: Address: 5550 BAFFIN CIRCLE City-St-Zip: THONOTOSASSA, FL 33592 US City-St-Zip: SPRING HILL, FL 34606 US Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: DELGADO, ISIDRO Name: AL-HAMMADI, ABDELWAHAB 5164 ROYAL CYPRESS CIRCLE Address: Address: 8210 WHISTLING PINE WAY City-St-Zip: TAMPA, FL 33647 US City-St-Zip: TAMPA, FL 33647 US Title: MGRM (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARIO A. PARRA MGRM 01/02/2007