2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

1695 NOVA RD HOLLY HILL, FL 32117 US	DOCUMENT # L06000097733 1. Entity Name FARRUKH & TARIQ LLC		SECRETARY OF STATE DIVISION OF CORPORATIONS
1695 NOVA RD HOLLY HILL, FL 32117 US 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip			08 APR 23 PM 4: 05
Suite. Apt. #, etc. City & State Zip Country 6. Name and Address of Current Regitation of Country 9. KINGSGATE CT ORMOND BEACH, FL 32174 FILE NOWILL FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/I TITLE MGRM JAMAL, TARIQ 19 KINGSGATE CT ORMOND BEACH, FL 32174 TITLE MGR NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Mailing Address 1695 NOVA RD HOLLY HILL, FL 3211	7 US	
Suite. Apt. #, etc. City & State Zip Country 6. Name and Address of Current Regitable Support Suppo	AA-37 - Add -		
City & State Zip Country 6. Name and Address of Current Regi JAMAL, TARIQ 19 KINGSGATE CT ORMOND BEACH, FL 32174 : 8. The above named entity submits this statement for the the obligations of registered agent. Signature, typed or printed name of registered agent and title that the obligations of registered agent. FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/!! MARE JAMAL, TARIQ 19 KINGSGATE CT ORMOND BEACH, FL 32174 TITLE NAME JAMAL, FARRUKH 19 KINGSGATE CT ORMOND BEACH, FL 32174 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Mailing Address		
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STREET ADDRESS	— Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	· Change Addition
In the property of the information supplied with this indicated on this report is true and accurate and that limited liability company or the receiver or trustee employers.	my signature shall have	the exemptions contained the same legal effect as if	d in Chapter 119, Florida Statutes. I further certify that the information made under oath; that I am a managing member or manager of the pter 608, Florida Statutes.
SIGNATURE:	7-1 - 5	JAMAL	4/18/08 386-X8-8022 SENTATIVE Date Dayline Phone #

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