

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118885

FILED
May 05, 2009
Secretary of State

Entity Name: SARAVALI ENTERTAINMENT AND AMUSEMENT, LLC

Current Principal Place of Business:

21610 FRONTENAC COURT
BOCA RATON, FL 33433 US

New Principal Place of Business:

6663 HOLLANDAIRE DR. WEST
BOCA RATON, FL 33433 US

Current Mailing Address:

21610 FRONTENAC COURT
BOCA RATON, FL 33433 US

New Mailing Address:

6663 HOLLANDAIRE DR. WEST
BOCA RATON, FL 33433 US

FEI Number: 84-1721277 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

SHMUELI, DAVID A
21610 FRONTENAC COURT
BOCA RATON, FL 33433 US

Name and Address of New Registered Agent:

SHMUELI, DAVID A
6663 HOLLANDAIRE DR. WEST
BOCA RATON, FL 33433 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: DAVID A. SHMUELI

05/05/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: SHMUELI, DAVID A
Address: 21610 FRONTENAC COURT
City-St-Zip: BOCA RATON, FL 33433 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHMUELI, DAVID A
Address: 6663 HOLLANDAIRE DR. WEST
City-St-Zip: BOCA RATON, FL 33433 US

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: DAVID A. SHMUELI

MGRM

05/05/2009

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