

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000003910

Entity Name: HUAD&JAI GROUP LLC

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

3413 50TH STREET W
BRADENTON, FL 34209

New Principal Place of Business:

Current Mailing Address:

3413 50TH STREET W
BRADENTON, FL 34209

New Mailing Address:

FEI Number: 20-8380699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROWRED, LAKKHANNA
3413 50TH STREET W
BRADENTON, FL 34209 US

Name and Address of New Registered Agent:

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:

Title: MGRM () Delete
Name: ROWRED, LAKKHANNA
Address: 3413 50TH STREET W
City-St-Zip: BRADENTON, FL 34209

Title: MGRM () Delete
Name: RAUDREW, SUPA
Address: 126/119 MOVAN PANIKA SOI 6 BANG WAC
City-St-Zip: BANGPI PASI JALLUN THAILAND,

Title: D () Delete
Name: SRICHOEDCHOO, VIPADA
Address: 3413 50TH STREET W
City-St-Zip: BRADENTON, FL 34209

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SRICHOEDCHOO, VIPADA
Address: 3413 50TH STREET W
City-St-Zip: BRADENTON, FL 34209

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: LAKKHANNA ROWRED

MGRM

04/27/2009

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