

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000009203

FILED
Apr 15, 2009
Secretary of State

Entity Name: NARINE, POONAI & HINHA, LLC

Current Principal Place of Business:

840 NW 72ND AVENUE
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

840 NW 72ND AVENUE
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 51-0672301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NARINE, ROBERT C
840 NW 72ND AVENUE
PLANTATION, FL 33317 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: NARINE, ROBERT C
Address: 840 NW 72ND AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: MGRM () Delete
Name: NARINE, LAKHASWRIE
Address: 840 NW 72ND AVENUE
City-St-Zip: PLANTATION, FL 33317

Title: MGRM () Delete
Name: POONAI, TEJ
Address: 6100 SW 158TH WAY
City-St-Zip: DAVIE, FL 33331

Title: MGRM () Delete
Name: POONAI, ROSE
Address: 6100 SW 158TH WAY
City-St-Zip: DAVIE, FL 33331

Title: MGRM () Delete
Name: SINHA, AJAY
Address: 8115 NW 72ND AVENUE
City-St-Zip: TAMARAC, FL 33321

Title: MGRM () Delete
Name: SINHA, SUROOJINE
Address: 8115 NW 72ND AVENUE
City-St-Zip: TAMARAC, FL 33321

ADDITIONS/CHANGES:

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

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

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

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

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

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

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: TEJ POONAI

MGRM

04/15/2009

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