

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000021210

Entity Name: SAGAR HOTELS AND RESORTS, LLC

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7638 LAKE ANDREA CIRCLE  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

9700 US HWY 441  
LEESBURG, FL 34788

**Current Mailing Address:**

7638 LAKE ANDREA CIRCLE  
MOUNT DORA, FL 32757

**New Mailing Address:**

9700 US HWY 441  
LEESBURG, FL 34788

FEI Number: 32-0195592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JARIWALA, OJASH N  
7638 LAKE ANDREA CIRCLE  
MOUNT DORA, FL 32757 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: MMGR  
Name: JARIWALA, OJASH N  
Address: 7638 LAKE ANDREA CIRCLE  
City-St-Zip: MOUNT DORA, FL 32757

Title: MGR  
Name: JARIWALA, CHAULA O  
Address: 7638 LAKE ANDREA CIRCLE  
City-St-Zip: MOUNT DORA, FL 32757

I hereby 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: OJASH N. JARIWALA

MMGR

02/16/2010

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