2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000033597

Entity Name: MANIAR, MILLER & WECHSLER CPA'S, LLC

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7737 N. UNIVERSITY DRIVE, STE. 201 2855 N. UNIVERSITY DRIVE, TAMARAC, FL 33321

SUITE 600

CORAL SPRINGS, FL 33065

Current Mailing Address: New Mailing Address:

7737 N. UNIVERSITY DRIVE, STE. 201 2855 N. UNIVERSITY DRIVE, TAMARAC, FL 33321 SUITE 600

CORAL SPRINGS, FL 33065

FEI Number: 20-8746114 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MANIAR, RAJU RAJU MANIAR CPA PA 7737 N. UNIVERSITY DRIVE, STE. 201 2855 N. UNIVERSITY DRIVE,

SUITE 600 TAMARAC, FL 33321

CORAL SPRINGS, FL 33065 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: RAJU MANIAR CPA PA 04/30/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGRM Title: () Delete (X) Change () Addition

MANIAR, RAJU Name: RAJU MANIAR CPA PA, Name:

7737 N. UNIVERSITY DRIVE, STE. 201 Address: 2855 N. UNIVERSITY DRIVE, SUITE 600 Address:

City-St-Zip: TAMARAC, FL 33321 City-St-Zip: TAMARAC, FL 33321

Title: MGRM () Delete Title: MGRM (X) Change () Addition

MILLER, JACK Name: JACK C MILLER CPA PA, Name: Address: 3300 UNIVERSITY DRIVE, #803 Address: 2855 N. UNIVERSITY DRIVE. SUITE 600

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

Title: MGRM () Delete Title: MGRM (X) Change () Addition CAROL WECHSLER CPA P, A WECHSLER, CAROL Name: Name: 3300 UNIVERSITY DRIVE, #803 2855 N. UNIVERSITY DRIVE, SUITE 600 Address: Address:

City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: CORAL SPRINGS, FL 33065

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: RAJU MANIAR CPA PA **MGRM** 04/30/2008