2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000050146

Entity Name: HARI HOLDINGS, LLC

FILED Jan 22, 2008 Secretary of State

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

2060 N. DONNELLY STREET MT. DORA, FL 32757

Current Mailing Address: New Mailing Address:

2060 N. DONNELLY STREET MT. DORA, FL 32757

FEI Number: 26-0203051 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:

NAGABHAIRU, LALBAHADUR S M.D. 2060 N. DONNELLY STREET MT. DORA, FL 32757 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete

Name: NAGABHAIRU, LALBAHADUR S M.D. Address: 2060 N. DONNELLY STREET

City-St-Zip: MT. DORA, FL 32757

Title: MGRM () Delete

Name: BASKAR, SOUNDARPANDIAN M.D.
Address: 2060 NORTH DONNELLY STREET

City-St-Zip: MT. DORA, FL 32757

 Title:
 MGRM () Delete

 Name:
 RAMAIAH, BHARATHI M.D.

 Address:
 3024 PALERMO COURT

 City-St-Zip:
 MT. DORA, FL 32757

Title: () Delete

Name:

Address: City-St-Zip: ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition Name: NAGABHAIRU, LALBAHADUR S M.D.

Address: 2060 N. DONNELLY STREET City-St-Zip: MT. DORA, FL 32757 US

Title: MGR (X) Change () Addition Name: BASKAR, SOUNDARPANDIAN M.D. Address: 2060 NORTH DONNELLY STREET

City-St-Zip: MT. DORA, FL 32757 US

Title: MGR (X) Change () Addition Name: RAMAIAH, BHARATHI M.D. Address: 2060 N DONNELLY STREET City-St-Zip: MT. DORA, FL 32757 US

Title: MGR () Change (X) Addition

Name: GOODMAN, JEFFREY A M.D.

Address: 1879 NIGHTINGALE LANE, SUITE C2

City-St-Zip: TAVARES, FL 32778 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: IVAN M LEFKOWITZ, ESQ ATTY

01/22/2008