2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 06, 2008
Secretary of State

DOCUMENT# L07000050767

Entity Name: SAWH ELECTRICAL COMPANY LLC

Current Principal Place of Business:

11411 NW 6TH ST
PLANTATION, FL 33325 US

New Principal Place of Business:

Current Mailing Address:

11411 N.W. 6TH ST
PLANTATION, FL 33325 US

New Mailing Address:

FEI Number: 26-1843013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SAWH, PRADEEP
11411 N.W. 6TH ST
PLANTATION, FL 33325 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: SAWH, PRADEEP
Address: 11411 N.W. 6TH ST
City-St-Zip: PLANTATION, FL 33325 US

Title: MGRM ( ) Delete
Name: SAWH, SHERINE
Address: 11411 N.W. 6TH ST
City-St-Zip: PLANTATION, FL 33325 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

Title: MGRM ( ) Change (X) Addition
Name: SAWH, DAVE
Address: 11411 N. W. 6TH STREET
City-St-Zip: PLANTATION, FL 33325 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: PRADEEP SAWH MGRM 07/06/2008

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