## 2008 LIMITED LIABILITY COMPANY

## **FILED** 0 AMte

		ANNUAL	REPORT			Apr	28, 2	UU8	08:00 of Sta
DOCUI 1. Entity Nam GULF CIT	10	# L070000559 A LLC	948			S	Secret	ary (	of Sta
Principal Place of Business 2845 N. MILITARY TRAIL WEST PLAM BEACH, FL 33409		Mailing Address 2845 N. MILITARY TRAIL WEST PLAM BEACH, FL 33409				- 88781 DILBI BIIYA	19111 41841 38	(MW) ((1 18W)	
2. Principal P	Place of Busin	ness - No P.O Box#	3. Mailing Address						
Suite, Apt #, etc.		Suite, Apt. #, etc.		04212008	Chg-LLC	CR2E083	3 (12/06)		
City & State			City & State		4. FEI Numb	per		_ <del> </del>	pplied For at Applicable
Zip	•	Country	Zip	Country		e of Status Desired	□ F€	5.00 Add e Required	
	6. Name	and Address of Current R	egistered Agent	• • • • • • • • • • • • • • • • • • • •	7. Name an	d Address of New Re	egistered Ag	ent	
GUPTA, RAM P 2845 N. MILITARY TRAIL WEST PALM BEACH, FL 33409				Street Addre	ess (P.O. Box Numb	per is Not Acceptable	)		
				City			FL.	Zip Code	е
	named entit tions of regist		the purpose of changing its r	egistered office or regi	istered agent, or be	oth, in the State of Flo.	rida. I am far	niliar with,	and accept
SIGNATURE .									
	Street ire typed	or printed came of requestioned agent an	d Mar ( popularity (A)OTE	Denictored Agent canaluse rec	aured when renetating)		DATE		
FILE	NOW!!!	FEE IS \$138.75 Fee will be \$538.75	of little if applicable (NOTE	Registered Agent signature rec	quired when reinstating)		DATE e check pay Departmer		,
FILE After May	NOW!!!	FEE IS \$138.75 Fee will be \$538.75			quired when reinstating)	Florida	e check pay Departmer		)
FILE	MGRM GUPTA, F 2845 N. M	FEE IS \$138.75 Fee will be \$538.75 MANAGING MEMBER RAM P MILITARY TRAIL		10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	quired when reinstating)		check pay Departmen		e Addition
FILE After May  9.  TITLE NAME STREET ADDRESS	MGRM GUPTA, F 2845 N. M	FEE IS \$138.75 Fee will be \$538.75 MANAGING MEMBER	IS/MANAGERS	10. TITLE NAME STREET ADDRESS	guired when reinstating)	Florida ADDITIONS/	e check pay Departmen CHANGES	Change	
FILE After May  9.  TITE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM GUPTA, F 2845 N. M	FEE IS \$138.75 Fee will be \$538.75 MANAGING MEMBER RAM P MILITARY TRAIL	S/MANAGERS	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	gured when reinstating)	ADDITIONS/	e check pay Departmen CHANGES ( 825858 80042-(	Change	noitibbA 🗌
FILE After May  9.  TITE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	MGRM GUPTA, F 2845 N. M	FEE IS \$138.75 Fee will be \$538.75 MANAGING MEMBER RAM P MILITARY TRAIL	S/MANAGERS  Delete	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	guired when reinstating)	ADDITIONS/	e check pay Departmen CHANGES ( 925855 ( 90042-(	Change	Addition  Addition  75
FILE After May  9.  TITE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	MGRM GUPTA, F 2845 N. M	FEE IS \$138.75 Fee will be \$538.75 MANAGING MEMBER RAM P MILITARY TRAIL	S/MANAGERS  Delete  Delete	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP	guired when reinstating)	ADDITIONS/	S25855 B25855 B25855 B25855 B25855 B25855 B25855 B25855 B25855	Change  Change  Change	Addition  Addition  75

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes, I further certify that the information indicated on this report is true and accurate and that my 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 emperaged to execute this report is required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE