

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076243

**FILED**  
**Jan 13, 2009**  
**Secretary of State**

**Entity Name:** AMERICAN REALTY GROUP OF USA, LLC

**Current Principal Place of Business:**

5190 10TH AVE NORTH  
GREENACRES, FL 33463

**New Principal Place of Business:**

4524 GUN CLUB RD  
209  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

5190 10TH AVE NORTH  
GREENACRES, FL 33463

**New Mailing Address:**

4524 GUN CLUB RD  
209  
WEST PALM BEACH, FL 33415

**FEI Number:** 26-0585423

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KORAPATI, KRISHNA R  
8401 LAKE WORTH ROAD,  
SUITE# 212  
LAKE WORTH, FL 33467 US

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

KORAPATI, KRISHNA R  
2034 BONISLE CIRCLE  
PALM BEACH GARDENS, FL 33418 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:**

01/13/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM ( ) Delete  
**Name:** KORAPATI, KRISHNA R  
**Address:** 5190 10TH AVE NORTH  
**City-St-Zip:** GREENACRES, FL 33463

**ADDITIONS/CHANGES:**

**Title:** MGRM (X) Change ( ) Addition  
**Name:** KORAPATI, KRISHNA R  
**Address:** 4524 GUN CLUB RD SUITE 209  
**City-St-Zip:** WEST PALM BEACH, FL 33415

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:** KRISHNA R KORAPATI

MGRM

01/13/2009

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