2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000081251

Address:

City-St-Zip:

3678 KESTREL CT.

MELBOURNE, FL 32934

Entity Name: PH & NJ LIMITED LIABILITY COMPANY

FILED Mar 16, 2009 Secretary of State

Current Principal Place of Business:			New Principal Plant	New Principal Place of Business:	
1200 MAL	ABAR RD				
	r, FL 32907	FL			
Current Mailing Address:			New Mailing Add	New Mailing Address:	
1200 MAL	ABAR RD				
UNIT 3 PALM BAY	r, FL 32907	,			
FEI Number	: 26-0708252	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
PATEL, NIALMBEN A 1340 CIBOLA DR. MELBOURNE, FL 32934 US			1200 MAĹABAR R UNIT 3	GANDHI, HEMANT 1200 MALABAR ROAD UNIT 3 PALM BAY, FL 32907 US	
	e named ent e of Florida.	ity submits this statement for the p	ourpose of changing its regis	tered office or registered agent, or both,	
SIGNATURE: HEMANT GANDHI				03/16/2009	
	Elect	ronic Signature of Registered Age	ent	Date	
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR GANDHI, PF 1200 MALA PALM BAY,	BAR RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR GANDHI, HE 1200 MALA PALM BAY,	BAR RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGR PATEL, NIL 1340 CIBOL MELBOURN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGR PATEL, JYO	(X) Delete DKSHIPBHAI K	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: PGANDHI 03/16/2009