

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000088131

**FILED**  
**Feb 17, 2010**  
**Secretary of State**

**Entity Name:** HETA RIYA, LLC

**Current Principal Place of Business:**

20020 NOB OAK AVE  
TAMPA, FL 33647

**New Principal Place of Business:**

**Current Mailing Address:**

20020 NOB OAK AVE  
TAMPA, FL 33647

**New Mailing Address:**

**FEI Number:** 26-1074109

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATEL, RAJESHKUMAR C  
3993 N. W. WISTERIA DR.  
LAKE CITY, FL 32055 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  
**Name:** PATEL, NILESHKUMAR C  
**Address:** 20629 GREAT LAUREL AVE  
**City-St-Zip:** TAMPA, FL 33647

**Title:** MGR  
**Name:** PATEL, RAJESHKUMAR C  
**Address:** 3993 N. W. WISTERIA DR.  
**City-St-Zip:** LAKE CITY, FL 32055

I hereby 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:** NILESHKUMAR C. PATEL

MGRM

02/17/2010

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