

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000089894

FILED
Apr 30, 2009
Secretary of State

Entity Name: ELITE ESTATE INVESTMENTS LLC

Current Principal Place of Business:

2617 PECAN PL.
JACKSONVILLE, FL 32259

New Principal Place of Business:

Current Mailing Address:

2617 PECAN PL.
JACKSONVILLE, FL 32259

New Mailing Address:

FEI Number: 61-1538054

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHAH, ARPIT M
2617 PECAN PL.
JACKSONVILLE, FL 32259 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: SHAH, ARPIT M
Address: 2617 PECAN PL.
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGRM () Delete
Name: PARIKH, ANKUR A
Address: 228 SPARROW BRANCH CIR.
City-St-Zip: JACKSONVILLE, FL 32259 US

Title: MGRM () Delete
Name: MAMTORA, VIPUL B
Address: 2901 EAST GINGER CT.
City-St-Zip: JACKSONVILLE, FL 32259 US

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: PARIKH, ANKUR A
Address: 1509 CULLAIG CT
City-St-Zip: JACKSONVILLE, FL 32259 US

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

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: ANKUR PARIKH

MGRM

04/30/2009

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