

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000001716

FILED
Apr 30, 2009
Secretary of State

Entity Name: CEGINUS MANAGEMENT CONSULTING, LLC

Current Principal Place of Business:

5425 NW 184 STREET
MIAMI, FL 33055

New Principal Place of Business:

3350 SW 148TH
110
MIRAMAR, FL 33027

Current Mailing Address:

5425 NW 184 STREET
MIAMI GARDENS, FL 33055

New Mailing Address:

3350 SW 148TH AVE
MIRAMAR, FL 33027

FEI Number: 26-1731686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GHULAMALI, SALIM
5425 NW 184 STREET
MIAMI GARDENS, FL 33055 US

Name and Address of New Registered Agent:

GHULAMALI, SALIM
3350 SW 148TH AVE
MIRAMAR, FL 33027 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: SALIM GHULAMALI

04/30/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GHULAMALI, SALIM
Address: 5425 NW 184 STREET
City-St-Zip: MIAMI GARDENS, FL 33055

Title: MGRM () Delete
Name: GHULAMALI, ANAR
Address: 5425 NW 184 STREET
City-St-Zip: MIAMI, FL 33055

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GHULAMALI, SALIM
Address: 3350 SW 148TH AVE # 110
City-St-Zip: MIRAMAR, FL 33027

Title: MGRM (X) Change () Addition
Name: GHULAMALI, ANAR
Address: 3350 SW 148TH AVE
City-St-Zip: MIRAMAR, FL 33027

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: SALIM GHULAMALI

MBR

04/30/2009

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