

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000006606

FILED
Aug 15, 2009
Secretary of State

Entity Name: XUAN AN, LLC

Current Principal Place of Business:

11922 WANDSWORTH DRIVE
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

11933 WANDSWORTH DRIVE
TAMPA, FL 33626

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

NGUYEN, THANH MY T.
11933 WANDSWORTH DRIVE
TAMPA, FL 33626 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: MGR () Delete
Name: NGUYEN, NUOC
Address: 645 DALHOUSIE CRESCENT
City-St-Zip: EDMONTON, AB, CANADA T6M2TA,

Title: MGRM () Delete
Name: NGUYEN, PHU TRONG
Address: 11933 WANDSWORTH DRIVE
City-St-Zip: TAMPA, FL 33626

Title: MGRM () Delete
Name: NGUYEN, DE THI
Address: 11933 WANDSWORTH DRIVE
City-St-Zip: TAMPA, FL 33626

Title: MGRM () Delete
Name: TON, DIEP TN
Address: 645 DALHOUSIE CRESCENT
City-St-Zip: EDMONTON, AB, CANADA, T6M2T4,

Title: MGRM () Delete
Name: TRAN, TUAN ANH
Address: 11933 WANDSWORTH DRIVE
City-St-Zip: TAMPA, FL 33626

Title: MGRM () Delete
Name: NGUYEN, THANH MY T
Address: 11933 WANDSWORTH DRIVE
City-St-Zip: TAMPA, FL 33626

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: NGUYEN, NUOC
Address: 11933 WANDSWORTH DR
City-St-Zip: TAMPA, FL 33626 US

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

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

Title: MGRM (X) Change () Addition
Name: TON, DIEP TN
Address: 11933 WANDSWORTH DR
City-St-Zip: TAMPA, FL 33626 US

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

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: NUOC NGUYEN

MGR

08/15/2009

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