## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000047217

2602 CYPRUS DRIVE

City-St-Zip: PALM HARBOR, FL 34684 US

Address:

Entity Name: MEESRIYONG & HONGMANEE LLC

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	RUS DRIVE RBOR, FL 34684	US		
Current Mailing Address:			New Mailing Address:	
	RUS DRIVE RBOR, FL 34684	US		
FEI Number	: 41-2279529 FE	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of Curre	ent Registered Agent:	Name and Address of	of New Registered Agent:
2602 CYPI PALM HAP The above	ONG, CATHERINE RUS DRIVE RBOR, FL 34684 named entity subn of Florida.	US	purpose of changing its registere	d office or registered agent, or both
SIGNATUI	RF.			
0.014, (1.0)		ignature of Registered Ag	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip: Title: Name: Address:	MGRM () Delete MEESRIYONG, CATHERINE 2602 CYPRUS DRIVE PALM HARBOR, FL 34684 US  MGRM () Delete MEESRIYONG, COTY 2602 CYPRUS DRIVE		Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition ( ) Change ( ) Addition
City-St-Zip:	PALM HARBOR, FL 34684 US		City-St-Zip:	
Title: Name: Address: City-St-Zip:	MGRM () Delete HONGMANEE, SUMON 2602 CYPRUS DRIVE PALM HARBOR, FL 34684 US		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	MGRM () Dele		Title:	( ) 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: CATHERINE MEESRIYONG MGRM 04/27/2009