

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000086865

Entity Name: EMRICAP LLC

**FILED**  
**Feb 16, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

111 NORTH POMPANO BEACH BLVD., SUITE 1204  
POMPANO BEACH, FL 30362

**New Principal Place of Business:**

1 NORTH OCEAN BLVD, SUITE1201  
POMPANO BEACH, FL 30362

**Current Mailing Address:**

111 NORTH POMPANO BEACH BLVD., SUITE 1204  
POMPANO BEACH, FL 30362

**New Mailing Address:**

1 NORTH OCEAN BLVD, SUITE1201  
POMPANO BEACH, FL 30362

FEI Number: 26-3399325

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HABBU, AJIT  
111 NORTH POMPANO BEACH BLVD., SUITE 1204  
POMPANO BEACH, FL 30362 US

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

HABBU, AJIT  
1 NORTH OCEAN BLVD., SUITE 1201  
POMPANO BEACH, FL 30362 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:

02/16/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: HABBU, AJIT  
Address: 1 NORTH OCEAN BLVD., SUITE 1201  
City-St-Zip: POMPANO BEACH, FL 30362

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: AJIT HABBU

CEO

02/16/2010

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