

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000105154

FILED
Jun 12, 2009
Secretary of State

Entity Name: KAZHAR ENTERPRISES, LLC.

Current Principal Place of Business:

3769 W. COQUINA WAY
WESTON, FL 33332 US

New Principal Place of Business:

Current Mailing Address:

3769 W. COQUINA WAY
WESTON, FL 33332 US

New Mailing Address:

FEI Number: 26-3710539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

Name and Address of New Registered Agent:

MIKE'S TAX & ACCOUNTING, INC.
269 N. UNIVERSITY DRIVE
SUITE I
PEMBROKE PINES, FL 33024 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ALI, HAFEEZ
Address: 3769 W COQUINA WAY
City-St-Zip: WESTON, FL 33332 US

Title: MGRM () Delete
Name: ALI, FARYAL
Address: 3769 W COQUINA WAY
City-St-Zip: WESTON, FL 33332 FL

Title: MGRM () Delete
Name: RAMDJAN, MOHAMED F
Address: 113 GOPAUL CIRCULAR DRIVE, UNION PARK
City-St-Zip: MARABELLA TRINIDAD,

Title: MGRM () Delete
Name: RAMDJAN, SHARIEFAR
Address: 113 GOPAUL CIRCULAR DRIVE, UNION PARK
City-St-Zip: MARABELLA TRINIDAD,

ADDITIONS/CHANGES:

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

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

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: HAFEEZ ALI

MGRM

06/12/2009

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