

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000025523

**FILED**  
**Jan 04, 2012**  
**Secretary of State**

**Entity Name:** JOGI PACK & SHIP SERVICES LLC

**Current Principal Place of Business:**

52 TUSCAN WAY,  
STE 202  
ST AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

52 TUSCAN WAY,  
STE 202  
ST AUGUSTINE, FL 32092

**New Mailing Address:**

**FEI Number:** 26-4749411

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

PATEL, DIVYAN N  
52 TUSCAN WAY  
STE 202  
ST AUGUSTINE, FL 32092 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  
**Name:** PATEL, DIVYAN N  
**Address:** 52 TUSCAN WAY STE 202  
**City-St-Zip:** ST AUGUSTINE, FL 32092 SJ

**Title:** MGRM  
**Name:** PATEL, VIJAY D  
**Address:** 52 TUSCAN WAY STE 202  
**City-St-Zip:** ST AUGUSTINE, FL 32092 SJ

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:** DIVYAN PATEK

MGR

01/04/2012

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