

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000080145

**Entity Name:** HOQUE ENTERPRISES, LLC

**FILED**  
**Jan 04, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

950 B GROVE HELMET WAY  
DELAND, FL 32720

**New Principal Place of Business:**

**Current Mailing Address:**

950B GROVE HELMET WAY  
DELAND, FL 32720

**New Mailing Address:**

**FEI Number:** 27-0769823

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOQUE, M.D.  
950B GROVE HELMET WAY  
DELAND, FL 32720 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:** MGRM  
**Name:** HOQUE, M.D.  
**Address:** 950B GROVE HELMET WAY  
**City-St-Zip:** DELAND, FL 32720

**Title:** MGRM  
**Name:** HANNAN, ABDUL  
**Address:** 304 HERITAGE ESTATE LANE  
**City-St-Zip:** DELAND, FL 32720

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:** M D HOUQUE

MGRM

01/04/2011

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