

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000067713

FILED
Apr 24, 2012
Secretary of State

Entity Name: ARYAN DENTAL EQUIPMENT REPAIR, LLC.

Current Principal Place of Business:

5369 PINE TERRACE
PLANTATION, FL 33317 US

New Principal Place of Business:

Current Mailing Address:

5369 PINE TERRACE
PLANTATION, FL 33317 US

New Mailing Address:

FEI Number: 27-2929803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BHUVANESHWAR, BALRAM
5369 PINE TERRACE
PLANTATION, FL 33317 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: BHUVANESHWAR, BALRAM
Address: 5369 PINE TERRACE
City-St-Zip: PLANTATION, FL 33317 US

Title: MGRM
Name: BHUVANESHWAR, LORNA
Address: 5369 PINE TERRACE
City-St-Zip: PLANTATION, FL 33317 US

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: BALRAM BHUVANESHWAR

MGRM

04/24/2012

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