

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000105637

Entity Name: KBR-USA CONSULTANTS, LLC

**FILED**  
**Apr 24, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

7661 NW 15TH STREET  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

**Current Mailing Address:**

7661 NW 15TH STREET  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

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

KHAN, M. SHAFIUL A  
7661 NW 15TH STREET  
PEMBROKE PINES, FL 33024 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: KHAN, M. SHAFIUL A  
Address: 7661 NW 15TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33024 US

Title: MGRM  
Name: KHAN, MD ABUL B  
Address: 6113 OAK BLUFF WAY  
City-St-Zip: LAKE WORTH, FL 33467 US

Title: MGRM  
Name: RASHEDUZZAMAN, MOHAMMED  
Address: 160 NW 97TH TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33071 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: SHAFIUL A KHAN

MGRM

04/24/2011

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