

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 05, 2006 8:00 am
Secretary of State

03-24-2006 90222 002 ****50.00

DOCUMENT # L94000000530

1. Entity Name
SARAN, L.C.



Principal Place of Business
**8335 BARTON FARMS BLVD.
SARASOTA, FL 34230**

Mailing Address
**8335 BARTON FARMS BLVD.
SARASOTA, FL 34230**

00004171



01102006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0536201

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PATEL, ASHA
8335 BARTON FARMS BLVD
SARASOTA, FL 34240**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature of person authorized to register agent on this document.

Signature of Registered Agent, if agent is required to change.

DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
KHUNT, NARUNDRA
8335 BARTON FARMS BLVD.
SARASOTA, FL 34240**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
PATEL, ASHA
8335 BARTON FARMS BLVD
SARASOTA, FL 34240**

TITLE
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STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE