## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## Aug 01, 2005 08:00 AM Secretary of State **DOCUMENT # L95000000340** SAAM'S PROPERTIES, L.C. Mailing Address Principal Place of Business 14285 AIRLINE HIGHWAY 14285 AIRLINE HIGHWAY BATON ROUGE, LA 70817 BATON ROUGE, LA 70817 CR2E083 (10/03) 07172005No Chq-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3318592 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCGILL, ROBERT E III DO NOT WRITE 743 HIGHWAY 98 EAST, SUITE 5 **DESTIN, FL 32541** IN THIS SPACE 3. The above named onlity 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstaling) Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE SACHDEV, MEENA G NAME 17946 AUGUSTA POINTE CT STREET ADDRESS BATON ROUGE, LA 70810 CITY-ST-7/P TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

11. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

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

1/29/05 225-753-29

**FILED**