

File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED *62 4/20*
98 APR 17 PM 12:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company **DOCUMENT # L97000000105**

FIRST S.M. LIMITED CO.
1313 BLANDING BLVD
ORANGE PARK FL 32073

1a. Principal Place of Business Address

1313 BLANDING BLVD
ORANGE PARK FL 32073

2. Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

01/28/1997

FL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

☐ Applied For

☐ Not Applicable

65-0725840

City & State

City & State

6. Date of Last Report

6. Certificate of Status Desired

\$8.75 Additional Fee Required ☐

Zip

Country

Zip

Country

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

GASWAMI, JAGADISH P
4455 CONFEDERATE PT RD
APT 2H
JACKSONVILLE FL 32210

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

Zip Code

FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE 03-11-98.

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GOSWAMI, JAGADISH P	4455 CONFEDERATE PT RD APT	JACKSONVILLE FL
MGR	PATEL, MUKESH	141-03 UNION TURNPIKE APT	FLUSHING NY
MGR	GOSWAMI, HARDEV P	4455 CONFEDERATE PT RD APT	JACKSONVILLE FL
MGR	GOSWAMI, UMESH P	315 FORSYTHE LN	DEKALB IL
7000002497777--2 -04/23/98--01049--027 ****188.75 ****188.75			

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

JAGADISH P. GOSWAMI 03-11-98.