

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000063

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: OSP INVESTMENTS, LLC

## Current Principal Place of Business:

C/O V.J. CHUKKAPALLI, CPA  
26 W. DRY CREEK CIRCLE, SUITE 340  
LITTLETON, CO 80120

## New Principal Place of Business:

C/O V.J. CHUKKAPALLI  
26 W. DRY CREEK CIRCLE, SUITE 340  
LITTLETON, CO 80120

## Current Mailing Address:

C/O V.J. CHUKKAPALLI, CPA  
26 W. DRY CREEK CIRCLE, SUITE 340  
LITTLETON, CO 80120

## New Mailing Address:

C/O V.J. CHUKKAPALLI  
26 W. DRY CREEK CIRCLE, SUITE 340  
LITTLETON, CO 80120

FEI Number: 64-0905071

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS ENTERPRISES INC.  
4521 PGA BOULEVARD E211  
PALM BEACH GARDENS, FL 33418 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/MEMBERS:

Title: MGRM ( ) Delete  
Name: PIDIKITI, NANNI  
Address: 26 W. DRY CREEK CIRCLE, SUITE 340  
City-St-Zip: LITTLETON, CO 80120

Title: MGRM (X) Delete  
Name: PIDIKITI, DEYNATH  
Address: 26 W. DRY CREEK CIRCLE, SUITE 340  
City-St-Zip: LITTLETON, CO 80120

Title: MGRM (X) Delete  
Name: PIDIKITI, SMITHA  
Address: 26 W. DRY CREEK CIRCLE, SUITE 340  
City-St-Zip: LITTLETON, CO 80120

Title: MGRM (X) Delete  
Name: PIDIKITI, GOWTHAM  
Address: 26 W. DRY CREEK CIRCLE, SUITE 340  
City-St-Zip: LITTLETON, CO 80120

Title: MGR (X) Delete  
Name: CHUKKAPALLI, V. J  
Address: 26 W. DRY CREEK CIRCLE, SUITE 600  
City-St-Zip: LITTLETON, CO 80120

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: CHUKKAPALLI, VJ  
Address: 26 W. DRY CREEK CIRCLE, SUITE 340  
City-St-Zip: LITTLETON, CO 80120

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: VJ CHUKKAPALLI

MGR

01/04/2005

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