

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000000557

FILED
Jan 10, 2012
Secretary of State

Entity Name: HAWA ENTERPRISES, L.L.C.

Current Principal Place of Business:

4812 26TH STREET WEST
BRADENTON, FL 342071705

New Principal Place of Business:

Current Mailing Address:

4812 26TH STREET WEST
BRADENTON, FL 342071705

New Mailing Address:

FEI Number: 65-0919612

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLARAKHIA, GULZAR
4812 26TH STREET WEST
BRADENTON, FL 342071705 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: MGR
Name: DELTA OPHTHALMICS, INC.
Address: 4812 26TH STREET WEST
City-St-Zip: BRADENTON, FL 342071705

Title: DR
Name: ALLARAKHIA, LIAQUAT
Address: 4812 26TH ST W
City-St-Zip: BRADENTON, FL 34207

Title: DR
Name: ALLARAKHIA, LIAQUAT
Address: 4812 26TH ST W
City-St-Zip: BRADENTON, FL 34207

Title: DR
Name: ALLARAKHIA, LIAQUAT
Address: 4812 26TH ST W
City-St-Zip: BRADENTON, FL 34207

Title: DR
Name: ALLARAKHIA, LIAQUAT
Address: 4812 26TH ST W
City-St-Zip: BRADENTON, FL 34207

Title: DR
Name: ALLARAKHIA, LIAQUAT
Address: 4812 26TH ST W
City-St-Zip: BRADENTON, FL 34207

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: LIAQUAT ALLARAKHIA

PRES

01/10/2012

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