

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000633

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: CREDITEK LLC

**Current Principal Place of Business:**

9 SYLVAN WAY, SUITE 165  
PARSIPPANY, NJ 07054

**New Principal Place of Business:**

**Current Mailing Address:**

9 SYLVAN WAY, SUITE 165  
PARSIPPANY, NJ 07054

**New Mailing Address:**

FEI Number: 22-3658826

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NATIONAL CORPORATE RESEARCH, LTD., INC.  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301 5 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 ( ) Delete  
Name: TYAGARAJAN, N V  
Address: 1251 AVE. OF THE AMERICAS, 41ST FLOOR  
City-St-Zip: NEW YORK, NY 10020

Title: MGR ( ) Delete  
Name: GUAGLIANONE, VICTOR  
Address: 1251 AVE. OF THE AMERICAS, 41ST FLOOR  
City-St-Zip: NEW YORK, NY 10020

Title: MGR ( ) Delete  
Name: FERRARA, JUAN  
Address: 40 OLD RIDGEBURY ROAD  
City-St-Zip: DANBURY, CT 06810

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

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: MGR ( ) Change (X) Addition  
Name: WHITE, LINDA  
Address: 9 SYLVAN WAY  
City-St-Zip: PARSIPPANY, NJ 10020

Title: P ( ) Change (X) Addition  
Name: VEERAPANENI, PRASAD  
Address: 13085 MORRIS RD, UNIT 5201  
City-St-Zip: ALPHARETTA, GA 30004

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: PRASAD VEERAPANENI

P

04/27/2009

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