2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0100002743

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

GREEN PEARL INVESTMENTS INDIA PVT, LLC



Sep 26, 2003 8:00 am Secretary of State 09-26-2003 90004 046 ****50.00

FILED

	,			A COS WE INS					
Principal Place of Business Mailing Address				,					
13395 SW:131 Miami Fl:3318		13395 SW 131 STREET MIAMI FL 33186	· · · · · · · · · · · · · · · · · · ·			00200			
									11 Ini 1 11
2. Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc. Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & State Povido City & State					4. FEI Numbe	f 62-0538502			plied For t Applicable
Zip 3	3186 Country	Zip	Zip Country		5. Certificate	of Status Desired	T -	5.00 Add e Required	
	6. Name and Address of Current	Registered Agent		Alexander	7. Name and	Address of New Regist	ered Age	ent	
BED	NARD, ANTHONY			Name		-			
9032 SW 152ND STREET MIAMI FL 33157				Street Address (P.O. Box Number is Not Acceptable)					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	W. C. C. C. C.								
				City			FL	Zip Code	
8. The above	named entity submits this statement for	or the purpose of changing its	registere	u ed office or registe	ered agent, or both	n, in the State of Florida.	I am fam	niliar with,	and accept
	ions of registered agent.		-	~ ~					
SIGNATURE .				, , , , , , , , , , , , , , , , , , ,					
	Signature; typed or printed name of registered agent	and title if applicable. (NOT	E: Registere	d Agent signature require	ed when reinstating)		DATE		
		ı		FEE IS \$50.00					
		Make Check Payab		-	ent of State				
		Due By	y Septe	mber 24, 2003					
9. MANAGING MEMBERS/MANAGERS						ADDITIONS/CHA	NGES		
TITLE	MGRM	☐ Delete	TITLE					Change	☐ Addition
NAME	MURUGAN, V.		NAM						
STREET ADDRESS CITY-ST-ZIP	117 KUTCHERY ROAD			ET ADDRESS - ST-ZIP					
	CHENNAI 600 004	Поль	_					7 Changa	
TITLE NAME	MGRM	☐ Delete	TITLE				L] Change	Addition
STREET ADDRESS	ALARMELMANGAI, M. 117 KUTCHERY ROAD			ET ADDRESS					
CITY-ST-ZIP	CHENNAL 600 004			-ST-ZIP					
TITLE	MGRM	- Delete	TITLE	:				:Change	☐ Addition
NAME	RAMESH, RAVI		NAM	1			_	1 change	[_] Flacillon
STREET ADDRESS	13395 SW 131 STREET			ET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33186		CITY	-ST-ZIP					
TITLE	MGRM	☐ Delete	TITLE	:			Г	Change	Addition
NAME	SINNARAJAH, KUSHULAKURMA		NAM				_	go	
STREET ADDRESS	13395 SW 131 STREET			ET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33186		CITY	-ST-ZIP					
TITLE	MGRM	☐ Delete	TITLE	:			Г	Change	Addition
NAME	NATHAN, S.S.		NAM				_		
STREET ADDRESS	13395 SW 131 STREET			ET ADDRESS					
CITY-ST-ZIP	MIAMI FL 33186	•		-ST-ZIP	•				

11. I 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 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.

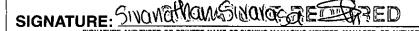
TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete



☐ Change

☐ Addition