2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000312

Address:

1015 HENLEY DOWNS PLACE

City-St-Zip: HEATHROW, FL 32746 FL

Entity Name: SUJJA IT CONSULTING, LLC

FILED Jul 03, 2006 Secretary of State

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
120 INTERNATIONAL PARKWAY, SUITE 220 HEATHROW, FL 32746			1015 HENLEY DOWNS PLACE HEATHROW, FL 32746	
Current Mailing Address:		New Mailing Addre	New Mailing Address:	
120 INTERNATIONAL PARKWAY, SUITE 220 HEATHROW, FL 32746			1015 HENLEY DOWNS PLACE HEATHROW, FL 32746	
	98-0217382 FEI Number Applied For() se with s. 607.193(2)(b), F.S., the limited liability of Address of Current Registered Agent:		Certificate of Status Desired() ice. of New Registered Agent:	
1015 HENI	INDER K MGRM LEY DOWNS PL W, FL 32746 US			
The above in the State	named entity submits this statement for the of Florida.	e purpose of changing its register	red office or registered agent, or both	
SIGNATUR	RE:			
	Electronic Signature of Registered A	 \gent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete JARVO, JIM 369 MOHAVE TERRACE LAKE MARY, FL 32746 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete GILL, SURINDER 1015 HENLEY DOWNS PLACE HEATHROW, FL 32746 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete KENT, DAVID L.V. 1015 HENLEY DOWNS PLACE HEATHROW, FL 32746 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete CHEVRIER, AMIET P	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Address:

City-St-Zip:

SIGNATURE: SURINDER GILL MGRM 07/03/2006