2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# M03000001696

Entity Name: J. AND S. SIDDIQUI LIMITED LIABILITY COMPANY

Current Principal Place of Business:

20 CARRIAGE HILLS
SAN ANTONIO, TX 78205

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 442067
JACKSONVILLE, FL 32222

New Mailing Address:

FEI Number: 58-2448529 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SIDDIQUI, SAMIR A
3840 BELFORT ROAD
SUITE 302
JACKSONVILLE, FL 32216 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: SIDDIQUI, JALEEL MD
Address: 3840 BELFORT ROAD (SUITE 302)
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGR ( ) Delete
Name: SIDDIQUI, SHAMEEM MD
Address: 3840 BELFORT ROAD (SUITE 302)
City-St-Zip: JACKSONVILLE, FL 32216

ADDITIONS/CHANGES:

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 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: JALEEL SIDDIQUI, MD MGR 04/13/2009

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