

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000004257

Entity Name: NARCAT LLC

FILED  
Apr 17, 2008  
Secretary of State

## Current Principal Place of Business:

480 WEST DUSSEL DRIVE, SUITE R  
MAUMEE, OH 435370119

## New Principal Place of Business:

480 WEST DUSSEL DRIVE  
SUITE R  
MAUMEE, OH 435370119

## Current Mailing Address:

480 WEST DUSSEL DRIVE, SUITE R  
ATTN: CATHY REDFORD  
MAUMEE, OH 435370119

## New Mailing Address:

P. O. BOX 119  
ATTN: CATHY REDFORD  
MAUMEE, OH 435370119

FEI Number: 37-1482188

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: SHAH, RASESH H  
Address: 480 WEST DUSSEL DRIVE, SUITE R  
City-St-Zip: MAUMEE, OH 435370119

Title: MGR ( ) Delete  
Name: GEORGE, RICHARD R  
Address: 480 WEST DUSSEL DRIVE, SUITE R  
City-St-Zip: MAUMEE, OH 435370119

Title: MGR ( ) Delete  
Name: BURNS, KEVIN P  
Address: 445 BROAD HOLLOW ROAD, SUITE 239  
City-St-Zip: MELVILLE, NY 11747

## 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:

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: RASESH H. SHAH

MGR

04/17/2008

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