


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 07, 2006 8:00 am
Secretary of State

02-07-2006 90073 032 ****50.00

DOCUMENT # M04000004870 1. Entity Name RAVI NILAYAM MANAGEMENT, LLC <i>Newport</i>	
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Principal Place of Business 4420 FM 1960 WEST, SUITE 224 HOUSTON, TX 77068	Mailing Address 4420 FM 1960 WEST, SUITE 224 HOUSTON, TX 77068
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01052006 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-1784094	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent KEATING, JOHN K. 749 N. GARLAND AVENUE, SUITE 101 ORLANDO, FL 32801	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR YALAMANCHILI, CHOWDARY 4420 FM 1960 WEST, SUITE 224 HOUSTON, TX 77068
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR STALLINGS, GEORGE W 7602 BRINKWORTH HOUSTON, TX 77070
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #