

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000914

Entity Name: AZAD MAJEED, LLC

FILED
Mar 31, 2006
Secretary of State

Current Principal Place of Business:

9588 N.E. JACKSONVILLE ROAD
ANTHONY, FL 32617

New Principal Place of Business:

9588 N.E. JACKSONVILLE ROAD
ANTHONY, FL 32617

Current Mailing Address:

PO BOX 70
ANTHONY, FL 32617

New Mailing Address:

PO BOX 70
ANTHONY, FL 32617

FEI Number: 20-2026820

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIMMEL, ROY
9588 N.E. JACKSONVILLE ROAD
ANTHONY, FL 32617 US

Name and Address of New Registered Agent:

MAJEED, AZAD
9588 N.E. JACKSONVILLE ROAD
ANTHONY, FL 32617 US

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: AZAD MAJEED

03/31/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAJEED, AZAD
Address: 9588 N.E. JACKSONVILLE ROAD
City-St-Zip: ANTHONY, FL 32617

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAJEED, AZAD
Address: 9588 N.E. JACKSONVILLE ROAD
City-St-Zip: ANTHONY, FL 32617

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.

SIGNATURE: AZAD MAJEED

MM

03/31/2006

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