

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000413738

**Entity Name:** REI GROUP TAMPA BAY LLC**Current Principal Place of Business:**20202 MERRY OAK AVE  
TAMPA, FL 33647**Current Mailing Address:**20202 MERRY OAK AVE  
TAMPA, FL 33647**FEI Number:** 87-2769696**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PATEL, MANISH  
20202 MERRY OAK AVE  
TAMPA, FL 33647 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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name VUMMAGONI, SWAPNA  
Address 20202 MERRY OAK AV  
City-State-Zip: TAMPA FL 33647

Title AMBR  
Name KARANAM, PRADEEP  
Address 20030 SATIN LEAF AVE  
City-State-Zip: TAMPA FL 33647

Title AMBR  
Name ARUMALLA, PRADEEP  
Address 2405 NEWCASTLE BEND  
City-State-Zip: IRVING TX 75063

Title AMBR  
Name UPPALI, SUNEEL KUMAR  
Address 100 NW 69TH CIRCLE UNIT #61  
City-State-Zip: BOCA RATON FL 33487

Title AMBR  
Name KOGANTI, RAJESH  
Address 3716 MINERAL DR  
City-State-Zip: LEANDER TX 78641

Title AMBR  
Name GADDAM, SRINIVAS  
Address 15211 CAPRIL ISLE LANE  
City-State-Zip: TAMPA FL 33647

Title AUTHORIZED MEMBER  
Name BANDHARAM, ANIL  
Address 8013 CYPRESS CROSSING CT  
City-State-Zip: TAMPA FL 33647

Title AUTHORIZED MEMBER  
Name CHANDRASHEKHAR , TALLA  
Address 10213 DEERCLIFF DR  
City-State-Zip: TAMPA FL 33647

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** SWAPNA VUMMAGONI

AMBR

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title AUTHORIZED MEMBER  
Name NARAYANDAS, KALPANA  
Address 10703 FOXTAIL PASTURE WAY  
City-State-Zip: TAMPA FL 33647

Title AUTHORIZED MEMBER  
Name EVURU, PRATHIMA  
Address 710 LAKEHILL WAY  
City-State-Zip: JOHN'S CREEK GA 30022

Title AUTHORIZED MEMBER  
Name SANDEEP KUMAR, DUBBAKA  
Address 20202 MERRY OAK AVE  
City-State-Zip: TAMPA FL 33647