## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000018602

Entity Name: KINETEK CONSULTING, LLC

FILED Jan 14, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 318 INDIAN TRACE, #700 WESTON, FL 33326 **Current Mailing Address: New Mailing Address:** 318 INDIAN TRACE, #700 WESTON, FL 33326 FEI Number: 75-3070529 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FRUITMAN, STEVE PARTNER 318 INDIAN TRACE, #700 WESTON, FL 33326 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: ADDITIONS/CHANGES: Title: (X) Change ( ) Addition () Delete KINETEK CONSULTING,, LLC FRUITMAN, STEVE MEMBER Name: Name: Address: 318 INDIAN TRACE, #700 Address: 318 INDIAN TRACE, #700 City-St-Zip: WESTON, FL 33326 City-St-Zip: WESTON, FL 33326 Title: Title: ( ) Change (X) Addition ( ) Delete STARZEWSKI, PHONG MEMBER Name: Name: Address: Address: 318 INDIAN TRACE, #700 City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: () Delete Title: MGR ( ) Change (X) Addition SCHINTZEL, JOHN MEMBER Name: Name: 318 INDIAN TRACE, #700 Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33326 MGR ( ) Change (X) Addition ARHANCET, JOHN MEMBER Title: () Delete Title: Name: Name: 318 INDIAN TRACE, #700 Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: () Delete Title: ( ) Change (X) Addition DELANEY, DAVID MEMBER Name: Name: 318 INDIAN TRACE, #700 Address: Address: City-St-Zip: City-St-Zip: WESTON, FL 33326 Title: () Delete Title: ( ) Change (X) Addition MINHAS, SHIMANDER MEMBER Name: Name: Address: Address: 318 INDIAN TRACE, #700 City-St-Zip: WESTON, FL 33326 City-St-Zip:

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: STEVE FRUITMAN MGR 01/14/2007