

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000023374

**FILED**  
**Jan 07, 2010**  
**Secretary of State**

**Entity Name:** KI TOV (LLC)

**Current Principal Place of Business:**

21382 MARINA COVE CIRCLE, #D13  
AVENTURA, FL 33180

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1516  
D13  
HALLANDALE BEACH, FL 30009

**New Mailing Address:**

**FEI Number:** 20-0064017      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BLUM, RAPHAEL MR.  
21382 MARINA COVE CIRCLE, #D13  
AVENTURA, FL 33180 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  
**Name:** BLUM, RAPHAEL  
**Address:** 21382 MARINA COVE CIRCLE, #D13  
**City-St-Zip:** AVENTURA, FL 33180

**Title:** MGR  
**Name:** BLUM, RACHEL  
**Address:** 21382 MARINA COVE CIRCLE, #D13  
**City-St-Zip:** AVENTURA, FL 33180

I hereby 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: RAPHAEL BLUM

MGR.

01/07/2010

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