

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000068838

FILED
Jul 03, 2008
Secretary of State

Entity Name: KM INVESTMENTS, LLC

Current Principal Place of Business:

C/O PETER MONTLABANO
6619 NW 78 DRIVE
PARKLAND, FL 33067

New Principal Place of Business:

101 NE 2ND AVE
DEERFIELD BEACH, FL 33441

Current Mailing Address:

C/O PETER MONTALBANO
6619 NW 78 DRIVE
PARKLAND, FL 33067

New Mailing Address:

101 NE 2ND AVE
DEERFIELD BEACH, FL 33441

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MONTE, CARL
C/O PETER MONTALBANO
6619 NW 78 DRIVE
PARKLAND, FL 33067 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

MANAGING MEMBERS/MANAGERS:

ADDITIONS/CHANGES:

Title: MGRM () Delete
Name: MONTE, CARL
Address: 21873 TOWN PLACE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: KALKAVAN, TAHSIN Y
Address: 4455 NW 24TH AVENUE
City-St-Zip: BOCA RATON, FL 33431

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TAHSIN Y. KALKAVAN

MGRM

07/03/2008

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