

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000085497

**FILED**  
**Jan 12, 2006**  
**Secretary of State**

**Entity Name:** KITE MIX MARKETING, LLC

**Current Principal Place of Business:**

2332 GALIANO STREET  
CORAL GABLES, FL 33134

**New Principal Place of Business:**

2332 GALIANO STREET  
2ND FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2332 GALIANO STREET  
CORAL GABLES, FL 33134

**New Mailing Address:**

2332 GALIANO STREET  
2ND FLOOR  
CORAL GABLES, FL 33134

FEI Number: 20-1959021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

LOPEZ, ALFREDO R  
2332 GALIANO ST  
CORAL GABLES, FL 33134 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: MGRM ( ) Delete  
Name: LOPEZ, ALFREDO R  
Address: 2332 GALIANO ST  
City-St-Zip: CORAL GABLES, FL 33134

Title: MGRM ( ) Delete  
Name: CORONA, ALFONSO  
Address: 2332 GALIANO ST  
City-St-Zip: CORAL GABLES, FL 33134

**ADDITIONS/CHANGES:**

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

Title: CMO (X) Change ( ) Addition  
Name: CORONA, ALFONSO  
Address: 2332 GALIANO ST  
City-St-Zip: CORAL GABLES, FL 33134

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: ALFONSO CORONA

CMO

01/12/2006

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