


**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 27, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000093145**  
 1. Entry Name  
**KG GROUP, LLC**



Principal Place of Business 230 PALERMO AVENUE CORAL GABLES, FL 33134	Mailing Address 230 PALERMO AVENUE CORAL GABLES, FL 33134
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**DO NOT WRITE IN THIS SPACE**



04112007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2115683	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

KORGE, THOMAS J  
 230 PALERMO AVENUE  
 CORAL GABLES, FL 33134

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00  
 Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM PRINCETON GROUP INVESTMENTS, LLC 230 PALERMO AVENUE CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR PRINCETON ASSOCIATES, LLC 250 PALERMO AVENUE, #606 CORAL GABLES, FL 33134
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	

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 05/11/07-80054-007 50.00

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE

**4/18/07** **305-444-9533**  
Date Daytime Phone #