

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000038053

Entity Name: 4K ASSOCIATES, LLC

FILED
Jul 07, 2009
Secretary of State

Current Principal Place of Business:

317 CHESTNUT STREET
WEST HEMPSTEAD, NY 11552

New Principal Place of Business:

Current Mailing Address:

317 CHESTNUT STREET
WEST HEMPSTEAD, NY 11552

New Mailing Address:

FEI Number: 13-4331574 FEI Number Applied For () FEI Number Not Applicable () 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:

LITWIN, AVI J
4434 SHERIDAN AVENUE
MIAMI BEACH, FL 33140 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: KESSELMAN, BERNARD A
Address: 317 CHESTNUT STREET
City-St-Zip: WEST HEMPSTEAD, NY 11552

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

Title: MGRM () Delete
Name: KESSELMAN, DOV
Address: 740 EVERGREEN DRIVE
City-St-Zip: WEST HEMPSTEAD, NY 11552

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

Title: MGRM () Delete
Name: KESSELMAN, MICHAEL S
Address: 86-56 MARENGO STREET
City-St-Zip: HOLLISWOOD, NY 11423

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

Title: MGRM () Delete
Name: KLEIN, JOEL J
Address: 203 ELM STREET
City-St-Zip: WEST HEMPSTEAD, NY 11552

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: BERNARD A. KESSELMAN

MGRM

07/07/2009

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