1A	Y COMPANY EPORT 9	LORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS				93 MAY -3 PM 1: 54					
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE								.			
1. Name and Malling Address of Limited Liability Company DOCUMENT # L97000001281 KARENCO, L.C. 1445 NORTHWEST 10TH STREET DANIA FL 33004								974M			
								1a. Principal Place of Business Address 1445 NORTHWEST 10TH STREET DANIA FL 33004			
2 Principal Place of Business 2a				2a. Mailing Address				Date Organized or Qualified 3a. State 11/17/1997 FL		te of Formation	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				4	4. FEI Number Applied For				
City & State		City & State				NOT APP	OT APPLICABLE Not Applicabl				
Žip		Country	Zıp	Country		ry	5	Date of Last R	,		icate of Status Desired
7. Name and Address of Cu		and Address of Correct	Pagistaged	Agant	and T		<u> </u>			\$8.75 Additional Fee Required	
ts registered	d office or regis	ons of Sections 608 416 stered agent, or both, in th accept the obligations.									he purpose of changing
SIGNATURI		(Registered Agen: Accepting		NOTE Registered A					DATE		
O. Title	Managing Members/Managers			Business Street Address			ess		City	y, State and Zip Code	
MGRM	MARTIN	EZ, ENRIQUE	A	1445	NORT	HWEST 1	OTH	STREET	DANIA	FL	
MGRM 1	MARTIN	EZ, GAIL L		1445	NORT	HWEST 1	OTH	STREET	AINAD	FL	
				r constant				50	0101010 -(157) ****	200 10799- 1188. 1	8825 -01006013 % ****188.
ndicated on imited liabili	this annual re	he information supplied w port is true and accurate the receiver or trustee er ss.	and that my	signature shall	have the:	same legal effec	ctasifo	nade under oath;	that I am a ma	naging me	mber or manager of th

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