


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2006 08:00 AM
Secretary of State

DOCUMENT # L97000000473

1. Entity Name
KSK HOTEL, L.C.



Principal Place of Business
**1677 COLLINS AVENUE
 MIAMI, FL 33139**

Mailing Address
**% MILLER & WEBNER, P.A.
 PO BOX 266947
 WESTON, FL 33326-6947**

DO NOT WRITE IN THIS SPACE



03072006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
65-0842268 Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**MILLER, REBECCA M
 % MILLER & WEBNER, P.A.
 2442 POINCIANA COURT
 WESTON, FL 33327**

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 _____ (NOTE: Registered Agent signature required when re-stating) DATE _____

**Filing Fee is \$50.00
 Due by May 1, 2006**

U00000518510
 05/02/06-80015-002 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JANZON, KATJA 1677 COLLINS AVE. MIAMI BEACH, FL 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR KRAUSE, HANS-JOACHIM 1677 COLLINS AVE. MIAMI BEACH, FL 33139
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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.

(954) 385-9030

SIGNATURE: *[Signature]* _____
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #