

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000096529

**Entity Name:** K & M HANDLING, LLC

**Current Principal Place of Business:**

2119 NW 79 AVENUE  
DORAL, FL 33122

**Current Mailing Address:**

PO BOX 523673  
MIAMI, FL 33152

**FEI Number:** 26-3545003

**Certificate of Status Desired:** No

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

ALEMAN, MARIA E  
2119 NW 79 AVE.  
MIAMI, FL 33122 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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           ALEMAN, MARIA E  
Address        2119 NW 79 AVENUE  
City-State-Zip: DORAL FL 33122

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARIA ALEMAN

**MANAGER**

**03/08/2013**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date