

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000021303

Entity Name: HTG KONOVER, LLC**Current Principal Place of Business:**3225 AVIATION AVE.
602
COCONUT GROVE, FL 33133**Current Mailing Address:**3225 AVIATION AVE.
602
COCONUT GROVE, FL 33133 US**FEI Number:** 27-1984551**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATTHEW RIEGER, P.A.
3225 AVIATION AVE.
602
COCONUT GROVE, FL 33133 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	MGR
Name	RIEGER, RANDY
Address	3225 AVIATION AVE. #602
City-State-Zip:	COCONUT GROVE FL 33133

Title	P
Name	RIEGER, RANDY
Address	3225 AVIATION AVE, STE. 602
City-State-Zip:	COCONUT GROVE FL 33133

Title	VP
Name	RIEGER, MATTHEW
Address	3225 AVIATION AVE, STE. 602
City-State-Zip:	COCONUT GROVE FL 33133

Title	ST
Name	SARIOL, MARIO
Address	3225 AVIATION AVE, STE. 602
City-State-Zip:	COCONUT GROVE FL 33133

Title	VP
Name	COHEN, ED
Address	3225 AVIATION AVE, STE. 602
City-State-Zip:	COCONUT GROVE FL 33133

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: MATTHEW RIEGER

VP

04/16/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date