


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 31, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000005302 1. Entity Name GOLDEN GATE K, LLC	
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Principal Place of Business 550 MAMARONECK AVENUE SUITE 404 HARRISON, NY 10528	Mailing Address 550 MAMARONECK AVENUE SUITE 404 HARRISON, NY 10528
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DO NOT WRITE IN THIS SPACE



02182004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 13-4115300	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BLALOCK LANDERS WALTERS & VOGLER PA 802 11TH STREET WEST BRADENTON, FL 34205

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE _____


**Filing Fee is \$50.00
Due by May 1, 2004**

000000100220
03/31/04-80038-002 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KAYDEN, BERNARD H 550 MANARONECK AVENUE, SUITE 404 HARRISON, NY 10528
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE:  **Bernard H. Kayden, Managing Member February 19 2004 (865)5844175**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #