2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2004
Secretary of State

DOCUMENT# L00000008399

Entity Name: D & K TOWN PLANNING, LLC

Current Principal Place of Business:

201 S. BISCAYNE BLVD., SUITE 1700
C/O JENA E. RISSMAN
MIAMI, FL 33131

New Principal Place of Business:

80 NE 97TH STREET
MIAMI SHORES, FL 331382331

Current Mailing Address:

201 S. BISCAYNE BLVD., SUITE 1700
C/O JENA E. RISSMAN
MIAMI, FL 33131

New Mailing Address:

80 NE 97TH STREET
MIAMI SHORES, FL 331382331

FEI Number: 65-1029592 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MIAMI CENTER REGISTERED AGENTS, INC.
201 S. BISCAYNE BLVD., SUITE 1700
MIAMI, FL 33131

Name and Address of New Registered Agent:

KOHL, JOSEPH A
80 NE 97TH STREET
MIAMI SHORES, FL 331382331

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: JOSEPH A. KOHL 06/30/2004
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: DOVER, VICTOR B
Address: 6227 SW 57TH STREET
City-St-Zip: SOUTH MIAMI, FL 33134

Title: MGR ( ) Delete
Name: KOHL, JOSEPH A
Address: 80 NE 97TH STREET
City-St-Zip: MIAMI SHORES, FL 331382331

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

SIGNATURE: JOSEPH A. KOHL MGR 06/30/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date