2004 LIMITED LIABILITY COMPANY

FILED 4M

ANNUAL REPORT				Apr 29, 2004 08:00 A	
DOCUMENT # L00000000411 1. Entity Name KKD, LLC				Secretary of State	
Principal Plac	ce of Business	Mailing Address	<u></u>	·	
1684 FLAGLER PARKWAY 1684 FLAGLER PARKWAY					
WEST PALM	BEACH, FL 33411	WEST PALM BEACH, FL 3341	1		
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				02252004 No Chg-LLC CR2E08	3 (10/03)
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				4. FEI Number 65-1060765	Applied For Not Applicab
				5. Certificate of Status Desired	5.00 Additional
<u> </u>	6. Name and Address of Curr	ent Registered Agent	T	Fe	e Required
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DISALVO, KIM K 1684 FLAGLER PARKWAY WEST PALM BEACH, FL 33411				DO NOT WRITE	
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The above the obliga	s named entity submits this stateme tions of registered agent.	nt for the purpose of changing its registe	red office or register	red agent, or both, in the State of Florida. I am fan	niliar with, and accep
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SIGNATURE.	Signature, typed or printed name of registered a	gent and title if applicable (NOTE Register	ed Agent signature required	d when reinstating) DATE	
Filing Fee is \$50.00			2222224		
Ď	ue by May 1, 2004			U00000141564 04/30/04-80013-0	23 EE NN
9.	MANIAGING ME	MBERS/MANAGERS	or 1, \$1, or diverse in a	0 11 301 0 1 30010 0	
TITLE	MGR	MOLUO MULANCICHO	4		
NAME	DISALVO, KIM K				
STREET ADDRESS CITY-ST-ZIP	1684 FLAGKER PARKWAY WEST PALM BEACH, FL 33	411	1		
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NAME STREET ADORESS					
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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:

NAME STREET ADDRESS CITY-ST-ZIP

URE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Daytime Phone #