

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000016161

Entity Name: HKP FINANCIAL LLC

FILED  
Apr 04, 2008  
Secretary of State

**Current Principal Place of Business:**

15291N.W. 60 AVE., STE. 200  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

15291 N.W. 60 AVE., STE. 200  
MIAMI LAKES, FL 33014

**New Mailing Address:**

15291N.W. 60 AVE., STE. 200  
MIAMI LAKES, FL 33014

FEI Number: 65-1138921

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HURWITZ, NORMAN  
C/O HKP FINANCIAL LLC  
15291N.W. 60TH AVE., STE. 200  
MIAMI LAKES, FL 33014 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: HURWITZ, NORMAN  
Address: 9200 W. BAY HARBOR DR. #3A  
City-St-Zip: MIAMI BEACH, FL 33154

Title: MGR ( ) Delete  
Name: KROLL, JOHN  
Address: 17864 NW 15TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33029

**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 exemption stated in Chapter 119, 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: NORMAN HURWITZ

MGR

04/04/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date