

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018685

Entity Name: KEN-MART REALTY, LLC

FILED  
Jun 08, 2004  
Secretary of State

## Current Principal Place of Business:

16725 N.W. 20TH AVE.  
MIAMI, FL 33056 US

## New Principal Place of Business:

## Current Mailing Address:

16725 N.W. 20TH AVE.  
MIAMI, FL 33056 US

## New Mailing Address:

FEI Number: 01-0575581

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RONALD M. GACHE, P.A.  
ONE NORTH CLEMATIS STREET  
SUITE 500  
WEST PALM BEACH, FL 33401 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/MEMBERS:

Title: MGRM ( ) Delete  
Name: GOLDMAN, MARTIN  
Address: 16725 N.W. 20TH AVE.  
City-St-Zip: MIAMI, FL 33056 US

Title: MGRM ( ) Delete  
Name: HABER, KENNETH  
Address: 16725 N.W. 20TH AVE.  
City-St-Zip: MIAMI, FL 33056 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

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

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

Title: MGRM ( ) Change (X) Addition  
Name: SIRIDT, GASTON  
Address: 16725 N.W. 20TH AVE.  
City-St-Zip: MIAMI, FL 33056 US

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: KENNETH HABER

MGRM

06/08/2004

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