

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 26, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000019316

1. Entity Name

KMG PROPERTIES LLC



Principal Place of Business

245 S.W. 31ST STREET
FT. LAUDERDALE, FL 33315

Mailing Address

245 S.W. 31ST STREET
FT. LAUDERDALE, FL 33315



02142004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

85-1156414

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHECHTER, JEROME R
315 S.E. 7TH STREET
FIRST FLOOR
FT. LAUDERDALE, FL 33301

**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**

000000067588
02/27/04-80008-001 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
MCMILLAN, TIMOTHY
245 S.W. 31ST STREET
FT. LAUDERDALE, FL 33315

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
PEARSON, GILLIAN
245 S.W. 31ST STREET
FT. LAUDERDALE, FL 33315

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

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

2/23/04

Date

9547613463

Daytime Phone #