2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## FILED Mar 05, 2007 08:00 Al Secretary of State DOCUMENT # L02000007877 KM INVESTMENTS, LLC Principal Placo of Business Mailing Addross 972 EVERGREEN DRIVE 972 EVERGREEN DRIVE DELRAY BEACH FL 33483 **DELRAY BEACH FL 33483** 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite Apt #, etc. 1st MOORE CR2E083 (10/06) City & State Applied For City & State 4. FEI Number 65-0686160 Not Applicable Zip Zip Country \$5.00 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MARTIN, KAYWIN L Street Address (P.O. Box Number is Not Acceptable) 972 EVERGREEN DRIVE DELRAY BEACH FL 33483 City Zip Code 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 it applicable. (NOTE: Registered Agent signature required when revisitning) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2007 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 9. 10, ■ Addition mu MGRM Delete шц Change MARTIN, KAYWIN L NAMI STRUCT ADDRESS STREET ADDRESS 972 EVERGREEN DR CHY-SI-ZIP CHY-ST-7P **DELRAY BEACH FL 33483** fillt Dclete Change Addition U00000656201 NAM! NAM 03/14/07-80016-006 50.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY+SI-7P CHY-SI-ZP ☐ Change 11111 Delete DRO Addition NAMI NAME STREET ADDRESS SUBLITADORESS CHY-ST-7/P CHY-ST-7IP ☐ Change Addition ☐ Delete NAME NAM STREET LANDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-7IP Change ш Addition ☐ Delete HHE NAMI NAME. STRUCT ADDRESS STRUCT ADDRESS CHY-S1-ZIP CHY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

SIGNATURE Mayer Mayer Kaywin L-Maytin 3-1-07 (561) 330-2300
SIGNATURE AND THE DEAME OF SIGNING MANAGING MEMBER MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daylorne Priore #

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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.