

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017460

Entity Name: NIKEEH HOLDINGS, LLC

FILED  
Jul 14, 2006  
Secretary of State

**Current Principal Place of Business:**

4270 DOUBLETREE COURT  
CUMMING, GA 30040

**New Principal Place of Business:**

**Current Mailing Address:**

4270 DOUBLETREE COURT  
CUMMING, GA 30040

**New Mailing Address:**

FEI Number: 20-4386530      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

HEEKIN, MARK ESQ.  
4540 SOUTHSIDE BLVD., SUITE 702  
JACKSONVILLE, FL 32216 US

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: MGRM ( ) Delete  
Name: GARKUSHA, ALEKSANDR D  
Address: 4270 DOUBLETREE COURT  
City-St-Zip: CUMMING, GA 30040

Title: MGR ( ) Delete  
Name: O'FLANAGAN, TIMOTHY  
Address: 6423 20TH STREET  
City-St-Zip: CALGARY, ALBERTA, CANADA, XX

**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 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: ALEKSANDR GARKUSHA

VP

07/14/2006

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