

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020253

Entity Name: HKC ENTERPRISE, L.C.

FILED  
Apr 21, 2007  
Secretary of State

## Current Principal Place of Business:

2008 PALACO GRANDE PKWY  
CAPE CORAL, FL 33904

## New Principal Place of Business:

## Current Mailing Address:

5109 DEL PRADO BOULEVARD  
CAPE CORAL, FL 33904

## New Mailing Address:

FEI Number: 01-0741023

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARTEL, VIOLA ACCOUNT  
5109 DEL PRADO BOULEVARD  
CAPE CORAL, FL 33904 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: MGRM ( ) Delete  
Name: SAUER, HORST R  
Address: HASENHAEGWEG 79  
City-St-Zip: ASCHAFFENBURG/GERMANY, D 63741

Title: MGRM ( ) Delete  
Name: KUFNER-SAUER, KRISTINA S  
Address: HASENHAEGWEG 79  
City-St-Zip: ASCHAFFENBURG/GERMANY, D 63741

Title: MGRM ( ) Delete  
Name: SAUER, CLAUDIA  
Address: HASENHAEGWEG 79  
City-St-Zip: ASCHAFFENBURG/GERMANY, D 63741

## ADDITIONS/CHANGES:

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

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: HORST SAUER

MGRM

04/21/2007

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