

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000027624

Entity Name: LKP LAMINATIONS, LLC

FILED  
Apr 22, 2004  
Secretary of State

**Current Principal Place of Business:**

600 WEST 84TH STREET  
HIALEAH, FL 33014

**New Principal Place of Business:**

10101 N.W. 79 AVE  
HIALEAH GARDENS, FL 33016

**Current Mailing Address:**

600 WEST 84TH STREET  
HIALEAH, FL 33014

**New Mailing Address:**

10101 N.W. 79 AVE  
HIALEAH GARDENS, FL 33016

FEI Number: 01-0751455

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

KUDEVIZ, LARRY  
600 WEST 84TH STREET  
HIALEAH, FL 33014

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

KUDEVIZ, LARRY  
10101 N.W. 79 AVE  
HIALEAH GARDENS, FL 33016

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: LARRY KUDEVIZ

04/22/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM (X) Delete  
Name: LEVIN, LEWIS M  
Address: 13643 DEERING BAY #155  
City-St-Zip: MIAMI, FL 33158

Title: MGRM ( ) Delete  
Name: PETRONE, CHRISTOPHER  
Address: 11241 NW 26TH ST.  
City-St-Zip: PLANTATION, FL 33323

Title: MGRM ( ) Delete  
Name: KUDEVIZ, LARRY  
Address: 5022 NW 119 TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076

**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 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: LARRY KUDEVIZ

MGRM

04/22/2004

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