

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 29, 2005  
Secretary of State**

DOCUMENT# L02000027624

Entity Name: LKP LAMINATIONS, LLC

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

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

**New Mailing Address:**

FEI Number: 01-0751455      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KUDEVIZ, LARRY  
10101 N.W. 79 AVE  
HIALEAH GARDENS, FL 33016      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/MEMBERS:**

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:

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

04/29/2005

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