

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028305

Entity Name: KIMPA, LLC

FILED
Jan 19, 2005
Secretary of State

Current Principal Place of Business:

19260 N.E. 23RD AVENUE
NORTH MIAMI BEACH, FL 33180

New Principal Place of Business:

3600 N.W. 37 COURT
MIAMI, FL 33142

Current Mailing Address:

19260 N.E. 23RD AVENUE
NORTH MIAMI BEACH, FL 33180

New Mailing Address:

3600 N.W. 37 COURT
MIAMI, FL 33142

FEI Number: 45-0511000

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN DOYLE, CPA, P.A.
175 FONTAINEBLEAU BLVD., STE. 1-B
MIAMI, FL 33172 US

Name and Address of New Registered Agent:

JOSE ALFIERI
3600 N.W. 37 COURT
MIAMI, FL 33142 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: JOSE ALFIERI

01/19/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: FOREITER, PABLO A
Address: 19260 N.E. 23RD AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: MGR (X) Delete
Name: FOREITER, ELIZABETH N
Address: 19260 N.E. 23RD AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33180

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: ALFIERI, JOSE
Address: 3600 N.W. 37 COURT
City-St-Zip: MIAMI, FL 33142

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: JOSE ALFIERI

MGR

01/19/2005

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