2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000029540

1. Entity Name
K.K.S. REALTY, L.L.C.

Principal Place of Business	Mailing Address
12030 N.W. 29TH MANOR SUNRISE, FL 33323	12030 N.W. 29TH MANOR SUNRISE, FL 33323

DO NOT WRITE IN THIS SPACE

01302004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
65-1178759	Not Applicable
5. Certificate of Status Desired ☐	**$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

KHAN, SHOIB
12030 N.W. 29TH MANOR
SUNRISE, FL 33323

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable.   (NOTE: Registered Agent signature required when reinstating)   DATE

Filing Fee is $50.00
Due by May 1, 2004

U00000042155
02/10/04-80012-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	SKHAN, SHOIB
STREET ADDRESS	12030 N.W. 29TH MANOR
CITY-ST-ZIP	SUNRISE, FL 33323
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify 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 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: _Shib-v-pm_   2-5-04   X 954-748-2873
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #