## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Jan 29, 2007 08:00 AM

ANNUAL REPORT		Jan 29, 200 / 08:00 A
DOCUMENT # L02000034915  1. Entity Name KH ENTERPRISES, LLC		Secretary of State
Principal Place of Business Mailing Address 2274 NIKI JO LANE 2274 NIKI JO LANE PALM BEACH GARDENS, FL 33410 PALM BEACH GARDENS, FL	. 33410	A REGION OF DOME AND EAST DOME OF THE CONTRACT
DO NOT WRITE IN THIS SPA	ACE	01152007 No Chg-LLC
6. Name and Address of Current Registered Agent KAHL, ROBERT L 2274 NIKI JO LANE PALM BEACH GARDENS, FL 33410		DO NOT WRITE IN THIS SPACE
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 registerest agent.  SIGNATURE  Signature, typed or printed name at redistand agent and the it applicable  [NOTE Registered Agent signature required when remainting]  Part  Filling Fee is \$50.00		
Due by May 1, 2007		
9. MANAGING MEMBERS/MANAGERS  ITTLE MGRM  NAME KAHL, ROBERT  STREET ADDRESS  CITY-ST-ZIP PALM BEACH GARDENS, FL 33410  ITTLE  NAME  STREET ADDRESS		U00000608605 U2/01/07-80015-U25 50.00
CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING MANAGING MEMBER OF AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #