2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000004434

SEMINOLE, FL 33777

FILED Feb 12, 2005 08:00 AM Secretary of State

J.S. KARA	ÃOKE, LLC				
Principal Place 7778 BENTG LARGO, FL 3	RASS COURT	Mailing Address P.O. BOX 650 PINELLAS PARK, FL 33780	 		
			Vaca de		
n	O NOT WRITE	IN THIS SDA	CE		CR2E083 (10/03)
	O NOT WITH	. IIV IIIIO OI A	U I	4. FEI Number 36-4209771	Applied For Not Applicable
				5. Certificate of Status Desired [□ \$5.00 Additional Fee Required
	6. Name and Address of Current	Registered Agent			
7778 BEN LARGO, F	R, JEAN M TGRASS COURT L 33777 —	. -		DO NOT WR IN THIS SPA	CE
8. The above the obligat	named entity submits this statement for ions of registered agent. Signature, type or printed name of registered agent.	<u> </u>	red office ar register ed Agent signature reduired		L 9 0 S
Fi D	lling Fee is \$50.00 ue by May 1, 2005		· .	物態 (1.1)	
9.	MANAGING MEMBE	RS/MANAGERS			A CONTRACTOR OF THE PROPERTY O
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P STRAUSER, JOHN E 7778 BENT GRASS CT. SEMINOLE, FL 33777 VP		^	U0000022 02/12/05-80	8504 018-013 50.00
NAME STREET ADDRESS	STRAUSER, JEAN M 7778 BENT GRASS CT		İ		

TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(1). 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608. Florida Statutes

SIGNATURE:

CITY - ST- ZIP

JRE:
SIGNATURE AND TYPEGOR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-9-05

727-507-066

Dafe

Daytime Phone #