

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000010488

Entity Name: SK IMPEX, LLC

FILED
Mar 31, 2006
Secretary of State

Current Principal Place of Business:

2829 WYOLA AVENUE
NORTH PORT, FL 34286

New Principal Place of Business:

825 D NORTH KEENE RD
APT D
CLEARWATER, FL 33755

Current Mailing Address:

PO BOX 4831
CLEARWATER, FL 33758

New Mailing Address:

FEI Number: 03-0512611

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARADATCHEV, KIRIL P
2829 WYOLA AVENUE
NORTH PORT, FL 34286 US

Name and Address of New Registered Agent:

KARADATCHEV, KIRIL P
825 D NORTH KEENE RD
APT D
CLEARWATER, FL 33755 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: KIRIL P. KARADATCHEV

03/31/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KARADATCHEV, KIRIL P
Address: 2829 WYOLA AVENUE
City-St-Zip: NORTH PORT, FL 34286

Title: MGRM () Delete
Name: ARSOV, STAMEN
Address: 2829 WYOLA AVENUE
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KARADATCHEV, KIRIL P
Address: 825 D NORTH KEENE RD
City-St-Zip: CLEARWATER, FL 33755

Title: MGRM (X) Change () Addition
Name: ARSOV, STAMEN
Address: 825 D NORTH KEENE RD
City-St-Zip: CLEARWATER, FL 33755

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: KIRIL P. KARADATCHEV

MM

03/31/2006

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