

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022415

FILED
Apr 30, 2009
Secretary of State

Entity Name: ABAKON LLC

Current Principal Place of Business:

1601 NW 38 AVE
LAUDERHILL, FL 33311

New Principal Place of Business:

Current Mailing Address:

151 N NOB HILL RD
152
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 80-0072805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAKON, SIMON
151 N NOB HILL RD
152
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KAKON, SIMON
Address: 151 N NOB HILL RD # 152
City-St-Zip: PLANTATION, FL 33324

Title: MGR () Delete
Name: ABADI, HENRY A
Address: 2226 OCEAN PKWY
City-St-Zip: BROOKLYN, NY 11223

Title: MMBR () Delete
Name: ABADI, SHILLA
Address: 2226 OCEAN PKWY
City-St-Zip: BROOKLYN, NY 11223

Title: MMBR () Delete
Name: OFRA, KAKON
Address: 151 N NOB HILL RD # 152
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SIMON KAKON

MGR

04/30/2009

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