2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000026838

1936 SHERWOOD GLEN

BLOOMFIELD HILLS, MI 48307

Address:

City-St-Zip:

Entity Name: KENKOY, LLC

FILED Jul 08, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2609 ILLINOIS ST. ORLANDO, FL 32803 **Current Mailing Address: New Mailing Address:** 2609 ILLINOIS ST ORLANDO, FL 32803 FEI Number: 20-0108179 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LLULL, ANTONIA 2609 ILLINOIS ST ORLANDO, FL 32803 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: Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete LLULL, ANTONIA Name: Name: 2609 ILLINOIS ST. Address: Address: City-St-Zip: ORLANDO, FL 32803 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LLULL, CARMEN Name: Name: Address: 420 BRIDLE PATH Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition LLULL, JOSE Name: Name: Address: 420 BRIDLE PATH Address: City-St-Zip: CASSELBERRY, FL 32707 City-St-Zip: () Delete Title: MGRM Title: () Change () Addition Name: BOUFFARD, JOSE ANTONIO Name: 1936 SHERWOOD GLEN Address: Address: City-St-Zip: BLOOMFIELD HILLS, MI 48302 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition BARACEROS, FIDELINA N Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Address:

City-St-Zip:

SIGNATURE: JOSE LLULL MGRM 07/08/2004