

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000032345

FILED  
Feb 22, 2006  
Secretary of State

Entity Name: KAUAI FAMILY PARTNERS, LLC

**Current Principal Place of Business:**

1216 NE 93RD STREET  
MIAMI SHORES, FL 33138 US

**New Principal Place of Business:**

**Current Mailing Address:**

1216 NE 93RD STREET  
MIAMI SHORES, FL 33138 US

**New Mailing Address:**

FEI Number: 41-2107032

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIMONS, BARRY L ESQ.  
9100 SOUTH DADELAND BLVD.  
SUITE 400  
MIAMI, FL 33156 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: MGRM ( ) Delete  
Name: GUSTER, KURT  
Address: 1216 NE 93RD STREET  
City-St-Zip: MIAMI SHORES, FL 33138

Title: MGR ( ) Delete  
Name: GUSTER, KRISTINA  
Address: 1216 NE 93RD STREET  
City-St-Zip: MIAMI SHORES, FL 33138 US

Title: MGRM ( ) Delete  
Name: GUSTER, KARL  
Address: 1216 NE 93RD STREET  
City-St-Zip: MIAMI SHORES, FL 33138 US

**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:

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: KURT GUSTER

MGRM

02/22/2006

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