

**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 14, 2005 8:00 am**  
**Secretary of State**

02-14-2005 90175 050 \*\*\*\*50.00

**DOCUMENT # L03000042124**

1. Entity Name  
**KADE INVESTMENT, LLC**



Principal Place of Business  
**1110 SOUTH FLAMINGO ROAD  
DAVIE, FL 33332**

Mailing Address  
**7027 WEST BROWARD BOULEVARD, SUITE 205  
PLANTATION, FL 33317**

**20010301**



02042005 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**16-1702364**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

**CLINE, HARRY S  
625 COURT STREET, SUITE 200  
CLEARWATER, FL 33756**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2005**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEHBY, JEREMY 7027 WEST BROWARD BOULEVARD, SUITE 205 PLANTATION, FL 33317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WEHBY, JENON F 7027 WEST BROWARD BOULEVARD, SUITE 205 PLANTATION, FL 33317
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**Jeremy Wehby** 2/10/05 (954) 723-7800

Date

Daytime Phone #