## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000029565

Address:

City-St-Zip:

PO BOX 697

GOTHA, FL 34734 US

Entity Name: THE KAIZEN CONNECTION L.L.C.

FILED Jan 21, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** PO BOX 697 3807 WALKER ROAD GOTHA, FL 34734 APOPKA, FL 32703 US US **Current Mailing Address: New Mailing Address:** PO BOX 697 GOTHA, FL 34734 US FEI Number: 04-3790461 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: PEARSON, KATI 3807 WALKER ROAD APOPKA, FL 32703 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/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition DOYLE-PATTERSON, MARILYN Name: Name: Address: PO BOX 697 Address: City-St-Zip: GOTHA, FL 34734 US City-St-Zip: Title: MGRM ( ) Delete Title: () Change () Addition CUPID-MCCOY, JENNIFER Name: Name: Address: PO BOX 697 Address: City-St-Zip: GOTHA, FL 34734 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition PEARSON, KATI Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: KATI PEARSON MS. 01/21/2007