

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000051422

FILED
Apr 30, 2005
Secretary of State

Entity Name: K-04, L.L.C.

Current Principal Place of Business:

C/O KEYUR K. PATEL
1013 JULIETTE BLVD.
MT. DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

C/O KEYUR K. PATEL
1013 JULIETTE BLVD.
MT. DORA, FL 32757

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PATEL, KEYUR
1013 JULIETTE BLVD.
MT. DORA, FL 32757 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/MEMBERS:

Title: MGRM () Delete
Name: PATEL, KEYUR K
Address: 1013 JULIETTE BLVD.
City-St-Zip: MT. DORA, FL 32757

Title: MGR () Delete
Name: PATEL, KRISHNA
Address: 2090 SUSSEX DRIVE
City-St-Zip: MT. DORA, FL 32757

Title: MGR () Delete
Name: PATEL, INDU
Address: 2090 SUSSEX DRIVE
City-St-Zip: MT. DORA, FL 32757

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 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.

SIGNATURE: KEYUR K. PATEL

MGRM

04/30/2005

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