## **2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000057000

1. Entity Name EKG, LLC



Principal Place of Business

C/O GENE B. GOLDIN 701 COLORADO AVENUE STUART, FL 34994

Mailing Address

C/O GENE B. GOLDIN 701 COLORADO AVENUE STUART, FL 34994

1.

FILED Jul 24, 2007 08:00 AM Secretary of State



07102007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-1436882

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDIN, GENE B 701 COLORADO AVENUE STUART, FL 34994

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The above named entity submits this statement for the purpose of char the obligations of registered agent	nging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE Signature typod or printed name of registered agent and title if applicable	(NOTF: Registered Agont signatura required when reinstating)	DAIE
Filing Fee is \$50.00 Due by September 14, 2007		

MANAGING MEMBERS/MANAGERS 9. MGRM HILE GOLDIN, GENE B NAME 701 COLORADO AVENUE STREET ADDRESS CITY-ST-ZIP STUART, FL 34994 TITLE NAME STREET ADDRESS CHY-ST-ZIP

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11. Hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

HILE NAME STREET ADDRESS

TITLE NAME STREET ADDRESS CITY-ST-7IP THE NAME STREET ADDRESS CITY-ST-ZIP mit NAME STREET ADDRESS CITY - ST- ZIP

CITY - ST- ZIP

AUTHORIZED REPRESENTATIVE