


**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 25, 2008 08:00 AM
Secretary of State

DOCUMENT # L04000058989 1. Entity Name KESTENBAUM INVESTMENTS LLC	
--------------------------------------------------------------------------------	-----------------------------------------------------------------------------------

Principal Place of Business 4101 PINETREE DRIVE APT. #303 MIAMI BEACH, FL 33140	Mailing Address 4101 PINETREE DRIVE APT. #303 MIAMI BEACH, FL 33140
------------------------------------------------------------------------------------------	------------------------------------------------------------------------------

DO NOT WRITE IN THIS SPACE



01212008No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-1486066	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent FITZGERALD, SAMANTHA ESQ. 1395 BRICKELL AVENUE 14TH FLOOR MIAMI, FL 33131

**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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KELLER, BETTY 27 DARBY ROAD EAST BRUNSWICK, NJ 08816
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ESTREICHER, SHELDON 2560 FAIR AVENUE COLUMBUS, OH 43209
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000796463
01/29/08-80034-008 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I 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:  SHELDON ESTREICHER 1/21/08 (614) 236-8367	<small>Signature AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone #</small>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------	---------------------	--------------------------------