

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000069973

Entity Name: KINASAR, LLC

FILED
Sep 15, 2009
Secretary of State

Current Principal Place of Business:

724 SW 6 ST
HALLANDALE, FL 33009 US

New Principal Place of Business:

Current Mailing Address:

724 SW 6 ST
HALLANDALE, FL 33009 US

New Mailing Address:

FEI Number: 20-1670061 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SARMIENTO, SOLANGE K
724 SW 6TH STREET
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

SARMIENTO, SOLANGE K
724 SW 6 ST
HALLANDALE, FL 33009 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: SOLANGE SARMIENTO

09/15/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM (X) Delete
Name: SARMIENTO, NANCY I
Address: 724 SW 6 ST
City-St-Zip: HALLANDALE, FL 33009 US

Title: MGRM () Delete
Name: SARMIENTO, SOLANGE K
Address: 724 SW 6 ST
City-St-Zip: HALLANDALE, FL 33009

Title: MGRM () Delete
Name: PACHECO, FEDOR A
Address: 724 SW 6 ST
City-St-Zip: HALLANDALE, FL 33009

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: SARMIENTO, SOLANGE K
Address: PO BOX 821
City-St-Zip: HALLANDALE, FL 33008

Title: MGRM (X) Change () Addition
Name: PACHECO, FEDOR A
Address: PO BOX 821
City-St-Zip: HALLANDALE, FL 33008

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

SIGNATURE: SOLANGE SARMIRNTO

MGR

09/15/2009

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