2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070615

Address:

City-St-Zip:

870 W 8TH ST.

GILROY, CA 95020

Entity Name: KLOCKEMANN-TRAN LLC

FILED Jul 14, 2006 Secretary of State

Current Principal Place of Business:		New Principal Pl	New Principal Place of Business:	
6736 GALI ZEPHYRH	L BLVD IILLS, FL 33541			
Current Mailing Address:		New Mailing Add	New Mailing Address:	
6736 GALI ZEPHYRH	L BLVD IILLS, FL 33541			
	: 37-1497055 FEI Number Applied For ce with s. 607.193(2)(b), F.S., the limited liab			
Name and	I Address of Current Registered Age	ent: Name and Addre	ss of New Registered Agent:	
6736 GALI ZEPHYRH	IILLS, FL 33541 US	or the purpose of changing its regis	stered office or registered agent, or both	
	e of Florida.			
SIGNATUI	RF.			
	Electronic Signature of Register	ed Agent	 Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM () Delete KLOCKEMANN, JURGEN 3028 FRUITDALE AVE SAN JOSE, CA 95128	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete HEIDLER, BETTY 3028 FRUITDALE AVE SAN JOSE, CA 95128	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete TRAN, LINHBAO A 870 W 8TH ST. GILROY, CA 95020	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	MGRM () Delete TRAN, FRANCES	Title: Name:	() Change () Addition	

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: JURGEN KLOCKEMANN MGR 07/14/2006