2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000082650

Entity Name: KAIBA GROUP, LLC

FILED Aug 30, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 3319 905 CHAPIN BLVD

SARASOTA, FL 34230 ENGLEWOOD, FL 34223

Current Mailing Address: New Mailing Address:

P.O. BOX 3319 1389 TANGIER WAY SARASOTA, FL 34230 SARASOTA, FL 34239

FEI Number: 20-1908463 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: Name and Address of New Registered Agent:

MOLLOD, MICHAEL
1634 MAIN STREET

MOLLOD, MICHAEL
1389 TANGIER WAY

SARASOTA, FL 34236 US SARASOTA, FL 34239 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: 08/30/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: () Change () Addition

 Name:
 MICHAEL MOLLOD REVOC, ABLE TRUST
 Name:

 Address:
 P.O. BOX 3319
 Address:

 City-St-Zip:
 SARASOTA, FL 34230
 City-St-Zip:

Title: MGR () Delete Title: () Change () Addition

 Name:
 ROXANNE MOLLOD REVOC, ABLE TRUST
 Name:

 Address:
 P.O. BOX 3319
 Address:

 City-St-Zip:
 SARASOTA, FL 34230
 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: MICHAEL MOLLOD MGR 08/30/2005