

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000094430

Entity Name: PK IMPORTS L.L.C.

FILED
Feb 15, 2005
Secretary of State

Current Principal Place of Business:

5200 NORTH OCEAN BLVD., APT 1610
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

Current Mailing Address:

5200 NORTH OCEAN BLVD., APT 1610
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 06-1738608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KRUGER, PEDRO
5200 NORTH OCEAN BLVD., APT 1610
FORT LAUDERDALE, FL 33308 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: KRUGER, PEDRO
Address: 5200 NORTH OCEAN BLVD., APT 1610
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: KRUGER, AMALIA
Address: 5200 NORTH OCEAN BLVD., APT 1610
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: MGR () Delete
Name: KRUGER, URSULA
Address: 5200 NORTH OCEAN BLVD., APT 1610
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

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

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

Title: () Change () Addition
Name:
Address:
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: PEDRO KRUGER

MGR

02/15/2005

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