2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 19, 2006 8:00 am Secretary of State 01-19-2006 90063 045 ****50.00

DOCUMENT # L05000060300 1. Entity Name KK GARDENS, LLC						01-19-2006	90063 045 ****	50.00
Principal Place of Business 3700 C. OCEAN BLVD., APT. #210B HIGHLAND BEACH, FL 33487 Mailing Address 3700 S. OCEAN BLVD., APT. #210B HIGHLAND BEACH, FL 33487				2108		-		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01122006	Chg-LLC	CR2E083 (11/05))
City & State		City & State			4. FEI Num	Der 217601	// A)	pplied For
Zip	Country	Zip Coun		itry	1	te of Status Desired	□ \$5.00 Ad Fee Require	Iditional
6. Name and Address of Current Registered Agent					7. Name an	d Address of New Re	gistered Agent	
WEINER & ARONSON, P.A.				Name GENE KRONICK				
C/O JASO			Street Address	(P.O. Box Num	ber is Not Acceptable)	, , , ,	-	
102 NORTH SWINTON AVENUE DELRAY BEACH, FL 33444				3700	Sauth D	KEAN BLUD	-1) ALLT #7	10B
				City 1	MAND B	CARI	FI 2959	#97
8. The above named entry submits this statement for the purpose of changing its registered office or registered the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered office or registered to the purpose of changing its registered to th						ERCH ooth, in the State of Flor	ida. I am familiar with	# 0 7 and accept
1 **	tions of registered agent.			-	• • • • •	, /,	12/200	_ /
SIGNATURE	Signeture, typed or printed name of registered agent	and title if applicable. (NO	TE Registerer	d Agent signature requir	red when reinstating)	///	0/15/2CC	<u> </u>
						T	<i>T</i>	
Filing Fee is \$50.00 Due by May 1, 2006							check payable to Department of Stat	te
9.	MANAGING MEMBE	RS/MANAGERS	10.			ADDITIONS/C	CHANGES	
TITLE NAME	MGRM KRONICK, GENE	☐ Delete	TITLE				☐ Change	Addition
STREET ADDRESS	STREET ADDRESS 3700 S. OCEAN BLVD., APT. #210B			ET ADORESS				
CITY-ST-ZIP	HIGHLAND BEACH, FL 33487			- ST-ZIP				
TITLE NAME	MGRM KATZ, MICHAEL	☐ Delete	TITLE				☐ Change	☐ Addition
STREET ADDRESS	29 BROADWAY, SUITE 2400			ET ADDRESS				
CITY-ST-ZIP	NEW YORK, NY 10006		_	-SI-ZIP				
NAME		☐ Delete	TITLE NAME				Change	Addition
STREET ADDRESS			STREE	ET ADDRESS				
CITY-ST-ZIP	<u> </u>			-ST-ZIP				
NAME		☐ Delete	TITLE				☐ Change	Addition
STREET ADDRESS			SIRE	ET ADDRESS				
CITY-ST-ZIP			_	-ST-ZIP				
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STREET ADDRESS				ET ADDRESS				
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NAME		☐ Delete	TITLE				☐ Change	☐ Addition
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP	cortify that the information supplied with	will then done and qualify to	L	-ST-ZIP	dia Chanter 110	Seed Contact to	· - · · · · · · · · · · · · · · · · · ·	
indicated limited lia	certify that the information supplied with don this report is true and accurate and ability company or the acciver or trustee	nat my signature shall have a empowerea to execute this	the same report as	Megal effect as if required by Cha	ø in Unapier ++≥ made under oat inter 608, Florida), Horida Statutes, i iun th; that I am a managir a Statutes,	ther certify that the into ng member or manage	ormation er of the
				, ,		1/12/01		

NTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE